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THE USE OF STUDENT-VOLUNTEERS IN A
PSYCHIATRIC SOCIAL GROUP WORK SETTING :
AN ANALYSIS OF THE CHARACTERISTICS OF BOTH
ACCEPTED AND REJECTED HIGH SCHOOL STUDENT-VOLUNTEERS

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S.F.J.

DEDICATION

To my parents, whose love, kindness, understanding,
and guidance made this achievement possible.

Sandra

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CHAPTER I

INTRODUCTION

This study deals with one phase of manpower management in which the personnel staff member or psychiatric social group work staff member plays a major role: the recruitment, selection, and induction of student-volunteers into an on-going agency social group work program.

Recruitment is the first phase in the employment procedure. The objective is to attract applicants to the agency in order that their qualifications for present and anticipated vacancies can be reviewed through the screening procedure. Selection, then, becomes the negative counterpart of recruitment. It serves the function of screening applicants made available by recruitment and choosing from this group those most likely to be effective in the level of required performance. In practice, it is difficult to separate the recruitment and selection phases completely since some selectivity must be exercised in any recruiting activity.¹

¹Harold Stone and William E. Kendall, Effective Personnel Selection Procedure (Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1956), pp. 1, 19-20.

In the above paragraph, recruitment and selection were contrasted as positive and negative functions. However, wartime manpower shortage forced personnel managers to reconsider this attitude toward the selection process. As a result, the best current practice emphasizes differential placement of applicants. In effect, this reverses the former practice of finding the best qualified applicant for a job. True positive selection involves finding the job most suited to the qualifications of each applicant. When differential placement is done properly, it actually accomplishes both the aim of finding the job most suited to applicants' qualifications and that of finding the best applicant for the job. Placement of an applicant on the basis of his experience, aptitudes, skills, and interests in the job for which he is best suited results in gaining a worker likely to meet the performance requirements.¹

Whether positive or negative selection is practiced in an agency or a company, the selection process consists of a series of steps. The selection procedure adopted will depend in part on the number of steps included in the selection process. In those agencies using only the

¹

Ibid., pp. 134-35.

application blank and an employment interview, the two steps would most often be in the order named.¹ At the Children's Psychiatric Center, the psychiatric social group work department has the following selection procedure steps:

1. Group interview with all volunteers on scheduled days.
2. Application blank completion.
3. Interview.
4. Ward tour.
5. Completion of interview.
6. Preliminary pre-rating by interviewer.

Applicants who do not wish to complete the interview procedure at any of the steps are encouraged to drop out making it possible to save time and vacancies for other interested volunteers. Applicants who complete the steps are contacted following the supervisors employment decisions and told of their job status. Only when the department has exhausted all possibilities for placement can it be said that the positive selection obligation has been fully discharged.² This factor was found to be one of the policies underlying the selection procedure at the Center as every application is completely studied and evaluated. By matching the job requirements against

¹
Ibid., pp. 135-36.

²
Ibid., p. 139.

qualifications of each applicant, positive selection can be achieved.

Throughout the discussion of selection devices which are presented in employment practice publications, emphasis is placed on use of objective measures, that is, selection methods and devices which minimize the need for judgments on the part of users. In case of personnel tests, for example, scoring can be made a mechanical, non-judgmental operation carried through by a clerk or by a test scoring machine. And, where possible, data that lend themselves to statistical treatment are preferred. This emphasis on objective measures that can be handled statistically is more than a reflection of personal opinion or bias. Significant advances and improvements in the selection process are not made in an agency until the personnel manager is able to measure the degree to which these factors are possessed by individual applicants.¹

Questions about methods, data, and process in making predictions were subjected to an intensive theoretical analysis by Meehl.² He suggested four simple combinations of method and data plus other more complex variations.

¹Ibid., pp. 141-42.

²Ibid., p. 144.

1. Psychometric data combined mechanically. By psychometric data are meant test data characterized by standardized conditions of administration, immediate recording of the behavior or behavior products, objective classification of the responses (scoring), norms. Mechanical (or statistical) refers to prediction arrived at by some straightforward applications of an equation or table to the data.
2. Psychometric data combined nonmechanically. An example might be found in the case of the skilled personnel psychologist who takes a Strong Vocational Interest Test profile and predicts satisfaction or dissatisfaction in a given job based on his inspection of the profile.
3. Non-psychometric data combined mechanically. Personal history data used in arriving at a weighted application blank score illustrate this combination.
4. Non-psychometric data combined nonmechanically. Based on review of the application blank and interview impressions an applicant is recommended for employment.

Meehl's review of the evidence bearing on the prediction problem is significant. He fails to find research evidence favoring the non-mechanical, intuitive, clinical method. There is a real need for careful studies in industry to evaluate the mechanical, actuarial, statistical, method of prediction in the employment situation.

The number of steps in the selection process may vary. Differing emphasis may be placed on those steps employed. The importance of mechanical and non-mechanical methods of prediction will not always be the same. One vital princi-

ple, however, is unvarying, and will affect any process utilized. Significant improvement in the selection process in an organization will depend on the extent to which crucial factors for success can be isolated and the reliability with which these factors can be measured in applicants.¹

The latter sentence points up one area to be explored in this study which is the predictability of performance and the basis for the acceptance and rejection of the student-volunteer applicants.

Since the major selective devices utilized by the social group work department are the application blank and interview, the writers thought an exploration of pertinent literature necessary.

Except for the interview, the application blank is the most widely used personnel selection device. In essence, the application blank should call for only such personal information as is essential for employment record purposes or has been found predictive of job success or tenure, along with concise data on work history and educational qualifications. Gathering of any additional information needed by the organization may

¹Ibid., p. 144.

well be postponed until after the decision to hire is made.¹ The potential utility of application-blank data in predicting job success will be limited unless information provided by the applicant is accurate.² In the interview, the staff member is able through the conversation to clarify as needed and make additions to the information recorded by the applicant.

The employment interview exemplifies three distinct functions: securing information, giving information, and establishing a friendly relationship. The interview is, first of all, a means of obtaining from the applicant the facts about his experiences and qualifications on which selection and placement are based. It serves, in the second place, to give him a picture of the position he is to fill and of the organization with which he will be connected, disadvantages and exactions as well as opportunities being fairly presented. The third function is to make a friend of the applicant, whether he is hired or not. The interviewer needs to keep all three of these functions in mind when reviewing his methods and techniques.³

¹Ibid., pp. 145-46.

²Ibid., pp. 145-46; 173.

³Walter Van Dyke Bingham, Bruce Victor Moore, and John W. Gustad, How to Interview (New York: Harper and Brothers, 1959), p. 97.

The effectiveness of the employment interview has and still is being questioned and ways of increasing it have been studied. The basic areas of concern in studying ways of increasing interview effectiveness, as examined by Stone and Kendall, were grouped into four categories:

Information about the applicant to be interviewed.
Information about the job.
The structure of the interview itself.
Interview skill.¹

The social group work department incorporates these categories into their interview procedure and selection process. The application blank is utilized to gather pertinent applicant information (See APPENDIX A). The interviewer is responsible for imparting job information to the applicant and for the structure of the interview itself. Two such interview structures, as utilized by two interviewing social group work supervisors, were collected and have been described (See APPENDIXES B and C). Little is known about the specific interviewers' skill, however, they were professional social workers, had studied the techniques of interviewing, and had worked in the program for which applicants were being interviewed.

The entire process of personality assessment might

¹ Stone and Kendall, op. cit., p. 210.

be described as an attempt to identify the unique characteristics of the individual - the extent to which he possesses given traits and the unique patterning of these traits in his personality make-up.

The characteristics of validity and reliability imply that the assessment device is objective. In an interview type of assessment, however, it is often much more difficult to achieve this criterion of objectivity - interviewers may vary considerably in their ratings, depending upon the methods used - but a certain level of objectivity must be maintained if the assessment procedure is to be valid and reliable. Error may be injected by the subject who is trying to make a good impression and is skillful at answering questions and putting up a good front. In other instances, sources of error stem from the examiner himself. Other difficulties may stem from the interviewer's biases, values, unconscious motivations, and limited range of experiences.

While it can be readily seen that the interview has many disadvantages as a method of assessment, it is nevertheless a highly valuable technique in the hands of a skilled interviewer; and interviewing skills can be taught and improved through experience. In fact, in making many complex decisions about an individual's

ability to function in certain types of situations, the interview often appears to be more reliable than psychological test data.¹

There is only one sure way of telling whether an untrained applicant will eventually prove satisfactory on a job. That way is to hire him, train him, and observe him for a period long enough for him to demonstrate he can perform effectively on the job. Although the one sure test, this is an expensive and time-consuming process. It may be expected to maximize labor turnover and inefficiency of performance.

An important function of modern manpower management is improving the adjustment of workers to their work. Careful selection and placement are essentials in performing this function. Use of the application blank and the interview is almost universal in current selection and placement procedures. The use of tests is perhaps the most controversial of all personnel procedures.² These procedures will not be discussed here as none are utilized in the selection process of the population studied in this project.

¹James C. Coleman, Personality Dynamics and Effective Behavior (Chicago: Scott, Foresman and Company, 1960), pp. 398; 401.

²Stone and Kendall, op. cit., pp. 233-35.

However, the application blank, interview procedure and selection process are being explored as these have been utilized by the psychiatric social group work department in their identification of the acceptable and rejectable student-volunteers. Thus, two more objectives of this study are pointed up. These objectives form the basis for this study and point up the problem area as being the need to analyze what characteristic determinants as presented by the high school and college student-volunteers and identified in the interview procedure were utilized as selective criteria in determining the accepted and rejected applicants. And which of these guidelines might effectively identify the performance useful in the psychiatric social group work program at the Children's Psychiatric Center, New Jersey State Hospital, Trenton, New Jersey.

Initially this study was undertaken as a group thesis project. However, the writer would like to make clear that the data for both high school and college student-volunteers has not been compiled, studied, and presented in a single report. The high school student-volunteers are represented in this study while readers are referred to a second study bearing a similar title, but containing the college student-volunteers representa-

tions as explored by Miss Bonnie Faye Pryor. Thus, each writer is in compliance with the university regulation which is that of presenting an individualized effort demonstrative of a meaningful research experience.

This is an agency related group thesis project and of such nature was chosen by the writers for the following reasons:

- A. The writers completed six months of block field work placement as graduate social group work students on the Children's Psychiatric Center staff, were familiar with the agency and the volunteer program as described in this study.
- B. The importance of and need for the study were made known to the writers by the agency's social work supervisors.
- C. The extensive amount of data, time allotted for school thesis chairman promoted such motivation.
- D. The data was made available to the writers along with joint weekly consultation with the social work supervisors.
- E. Due to the dearth of the literature on this subject, this study would appear to be of great value regarding the use of student-volunteers in the social work practices as well as in the other areas of mental health services.

Significance of the Study

Operating within the Children's Psychiatric Center is a psychiatric social group work program differing in many respects from other similar mental health programs. Since its conception in 1965, it has purposefully scheduled year around activity-oriented, therapeutic one-to-one group

experiences for the children. Both the summer day camp and spring-fall programs are clinically directed and controlled by competent and highly recognized psychiatrists, psychologists, and psychiatric social group workers. The psychiatric social group work services are clinically structured with therapeutic programs and limits to achieve its purpose and goal of facilitating social recovery, not cure. Able high school and college volunteers are used in a systematic manner to enhance the psychiatric social group work program. It is the purpose and way the volunteers at the Center are utilized that vastly differ from the beginning and subsequent uses of volunteers in other mental health facilities.

It is a current trend among social welfare and health agencies to use nonprofessional or semitrained personnel in their programs.¹ The most widespread reason for using auxiliary personnel as assistants is to relieve the heavy work load of the harassed social worker.^{2, 3, 4} The

¹William C. Richan, "A Theoretical Scheme for Determining Roles of Professional and Non-professional Personnel," Social Work, VI (October, 1961), 22.

²George Brager, "The Indigenous Worker: A New Approach to the Social Work Technician," Social Work, X (April, 1965), 33-40.

³Helen Reinberg, "The Therapeutic Use of Student Volunteers," Children, XI (July-August, 1964), 137-142.

⁴Felice Perlutler, Dorothy Durham, "Using Teen-Agers to Supplement Casework Service," Social Work, X (April, 1965), 41-46.

scope of the social agency's program has been greatly extended through the use of auxiliary personnel coordinated with professional supervision. People who would never have received the services of the various health and welfare agencies are now being helped.

Auxiliary personnel may be volunteers and salaried full-time or part-time employees. The term "volunteer" as used in this study differs from the current use of similar terms such as "non-professionals,"¹ "aides,"² and "indigenous non-professionals."³ "Volunteer" as employed by the Children's Psychiatric Center refers to a selected full or part-time student worker who does not undertake the specific tasks of regularly paid professional personnel; who may not receive pay, depending on the type of program offered; and who assists the professional psychiatric social group worker under planned periodic clinical supervision. The volunteer performs specific tasks within the structure and purpose of the agency and department programs, guided by an orthopsychiatric team. The

¹Marcella Farrar, Maryz Hemmy, "Use of Non-professional Staff in Work with the Aged," Social Work, VIII (July, 1963), 46.

²William C. Richan, "A Theoretical Scheme for Determining Roles of Professional and Non-professional Personnel," Social Work, VI (October, 1961), 28.

³Perry Levinson, Jeffery Schiller, "Role Analysis of the Indigenous Nonprofessional," Social Work, XI (July, 1966), 95.

volunteer is there for the specific use of himself in therapeutic face-to-face relationships with the children in group process under supervision. The volunteer may receive course credit as compensation for his participation during the spring-fall program, and a stipend for summer participation.

The use of volunteers in mental health roles is not something new. It has its background in volunteer services orienting in settlement houses and youth development centers. It is the work method, aims, and purposes of these centers that formed the bases for social group work. Historically, the use of volunteers progressed into hospitals rather haphazardly. In its earlier days, volunteers were viewed more as aides or friendly visitors rather than as integral parts of the treatment team and structure, as now exists at the Children's Psychiatric Center. Within the past few years, mental health services have begun to rely more extensively upon volunteer services. As yet, however, as pointed out in a study by Helen Reinberz, there has been little experience in the planned use of individual volunteer-patient relationships to bring about therapeutic change in mentally ill children.¹ It has now become the trend of mental hospitals to more effectively

¹Reinberg, loc. cit., p. 137.

and purposefully use volunteers in the treatment program by combining clinical psychiatric background and supervision with highly developed techniques and program of community center social group work. Such is the overall structure of the psychiatric social group work program at the Children's Psychiatric Center. At the Center, more emphasis is on the use of small social group work groups to achieve its goal of helping the patients move towards social recovery. It is the entity of groups and varied socialization experiences offered by such groups that distinguish this clinical method and focus from others.

What is it that volunteers have that mental health services, such as the Children's Psychiatric Center, find useful? As stated, in one of the Center's articles published in the New Jersey Association of Mental Hygiene Clinics Newsletter,¹ volunteers are a valuable part of the Children's Psychiatric Center's treatment program. They are not used as substitutes for regular salaried staff but are truly supplemental personnel; they are able to provide the children with therapeutic interpersonal relationships quite different from those which charac-

¹Bill Taylor, "The Use of Volunteers at the Children's Psychiatric Center, Trenton State Hospital," New Jersey Association of Mental Hygiene Clinics Newsletter, VIII (Fall, 1966), 14.

terize the interaction between patient and staff; they are able to provide goods and services that, although crucial in the daily living of a child, are not available; they are most effective when they are provided with regular, on-going supervision by clinical professionals; and their enthusiasm and creativity are contagious and their critical questions thought-provoking.

An Illinois mental hospital study supports the Children's Psychiatric Center's statement with additional findings.¹ They also find that able volunteers bring to the program desirable characteristics such as a sense of humor, a pleasant unhurried manner, a generous act, a breath and view of the normal, outside world; they are active, devoted, responsible people who give their time, effort, and friendship in a warm, generous, undemanding fashion.² Too, they ask to serve in a truly essential and useful manner for they are serious about their part in the program. The contributions of the mental health volunteers are unique ones for they serve as the eyes, hearts, and minds of the public. They bridge the gap between institutionalization and the outside community,

¹Agnes A. Sharp, Why Volunteers? In Illinois Mental Hospitals, 1952 (Illinois: Department of Public Welfare, 1952), pp. 11-15.

as Agnes A. Sharp describes it.¹

The volunteers hold an important position because it is through them that the warm community feelings, and society's norms and expectations are related to and experienced by the patients. The volunteers offer the patients opportunities to re-establish inter-human, inter-personal relationships. They offer warmth, friendliness, trust, companionship, comradeship, recognition, affection, and a chance for the child to reaffirm his own sense of worth.

The one factor that makes the use of volunteers unique to the Children's Psychiatric Center's program, and something new in the field of mental health, is the systematic use of young people as volunteers. The young people are the high school and college students recruited from the surrounding communities who are given goal-directed and clinically guided and controlled orientation and supervision. They take on therapeutic roles with emotionally disturbed children of ages 6-14, as discussed in the next chapter. To help the student volunteer use himself more effectively in the psychiatric social group

¹Agnes A. Sharp, How Volunteers Work in State Hospitals (Illinois: Department of Public Welfare, 1963), p. 11.

work program at the Children's Psychiatric Center, highly trained professionals extend on-going clinical supervision. In this manner, the professional worker sets the basic foundation and the volunteer assists by enriching the program.

The Children's Psychiatric Center purposefully recruits young high school and college students who wish to participate in volunteer activities. This is a relatively recent trend.^{1, 2, 3, 4} As of 1961, there had been little experience in the planned use of individual student volunteer-patient relationships to bring about therapeutic change in mentally ill children. The Center firmly believes that students serve as resources for day-to-day living experiences, and that they possess certain attitudes and attributes that the program needs in order to offer the best services to the children. The President's Panel on Mental Retardation also shares

¹Reinberg, loc. cit.

²Perlutler, loc. cit.

³Kenneth Close, "Training of Volunteers in the Field of Mental Retardation - An Experiment," Children, XII (September-October, 1964), 93-99.

⁴M. A. Mitchell, "The Use of College Student Volunteers in the Outpatient Treatment of Troubled Children," Mental Health With Limited Resources, ed. Hans Huessey (Grune and Stratton: New York City, 1960), p. 8-37.

this belief as stated in the proposal of its experimental program, the Voluntary Domestic Peace Corps. It " . . . aims at tapping the immense reservoir of intellectual and moral potential of our young people on the threshold of their career." ¹ The Center adds to the young people's reservoir of intellectual and moral potentials, the reservoir of adequate social potential.

The Center's rationale for using student volunteers in its psychiatric program rests upon four factors:

1) the students represent an active interest of the community, 2) the students are more flexible with changes than the adult staff, 3) the students, on a whole, are socially adequate persons, and 4) the Center operates on the "borrowed ego" theory, and the students more easily lend themselves as youthful and constant sources of desirable egos.

No longer does the conventional impression of young people remain; the image of the "irresponsible but lovable rogue more concerned with plans for a fraternity hazing than with community and world issues." ² Young people today stand in the forefront in calling attention to and in helping society rid itself of crucial social problems.

¹Close, loc. cit., p. 93.

²Mitchell, loc. cit., p. 29.

The students bring to the mentally ill children a feeling that the community still cares about them and that it does want them to return. As Elizabeth Ogg puts it, "We cannot give patients what volunteers can -- the assurance that the community has not forgotten them."¹ So interested are the volunteers in the children and the children in the volunteers, they both eagerly await meeting again with each other. As previously stated, the students, being representatives of the community, help the community become more aware of the needs and accomplishments in the field of mental health for children. They frequently represent and/or able to influence sources of community action.

The Center expresses the thought that high school seniors and college students are more flexible to changes. They seem to lend themselves easily and eagerly, yet maturely, to helping others and receiving help; they are freer with themselves, their feelings, ideas, opinions. Since they are volunteers, they do not have to worry about jeopardizing their jobs or professional standing, which might hinder free expression of ideas, and of receiving

¹Elizabeth Ogg, Jobs and Futures in Mental Health Work (New York: Public Affairs Committee, Inc., 1960), p. 27.

and effectively utilizing criticism and help through supervision. As students, they realize they are still at the point of learning, but by having reached senior high school and college level, they are knowledgeable enough and mature enough to be of value to the program. They are still at the stage of uninhabitedly and experimentingly putting into practice what they have and are still learning, yet also remaining pliable enough to learn more and/or to shift their opinions and ideas as deemed best for the good of the children and demanded by the program.

The third factor is that generally, students themselves are socially adequate persons. Because of their day-to-day socialization experiences at home, in school, and other aspects of community living, students of the senior high school and college levels have had a chance to acquire appropriate social behavior patterns. In this respect, the selection of students is somewhat biased because the recruiting process was aimed primarily at "prestige" high schools and colleges. It is the Center's feeling that students attending such schools have had a better-than-average opportunity to acquire and to put into practice acceptable social behavior.

The student volunteer should very definitely hold

acceptable social behavior patterns. This is vital to the child-patient since he looks to the volunteer for his source of learning and for strengthening his social and emotional behavior. When children spend a few hours a week or most of the day with student-volunteers, the children learn from them how to more nearly meet community expectations for socially appropriate behavior. As stated in a report prepared by the Center's orthopsychiatric team, student-volunteers are not as tolerant of psychopathy as the hospital ward staff. The firm and consistent expectations of student-volunteers is that their behavior approximate the general community expectations.¹

The primary therapeutic goal in the Children's Psychiatric Center is social habilitation. Twenty-four hours a day exposure to hospital environment tends to reinforce psychopathology, rather than strengthen potentials for mental health in these children, reports the Center's orthopsychiatric team.² With exposure to vibrant, healthy,

¹Nathan R. Sonnheim, Ruth Elizabeth Beck, Olga Frankel, Robert B. Pomeroy, Extra Mural Therapeutic Summer Day Camp For Children in a State Hospital. A report submitted to the New Jersey Association of Mental Hygiene Clinics, May, 1966, Newsletter, VIII (Fall, 1966).

²

Ibid.

accepting students, a positive strengthening of the children's healthy aspects of social functioning can be seen. This is due to the "borrowed ego" theory which serves as the primary theoretical base of the psychiatric social group work program.

In group, multiple transferences to peers and leaders within the group context literally implements the process of "borrowing ego," so important for strengthening patients with very frail egos.¹

Through purposely guided interaction with the student-volunteers, the mentally ill children take from the students their social consciousness of self. It is this "borrowed self" that helps the children keep in touch with external reality, that helps them to strengthen their own individual awareness of continuing identity, that helps them to develop and strengthen their own individual, healthy personalities.

Mentally ill people, to recover, need contacts with mentally well people who will spend time with them in visits to the hospital. Both giving and receiving means a mutual relationship. Here it costs nothing but giving yourself, your time, and your abilities from your earned and accumulated surplus in healthful living, to others who need to learn from what you have found but by successful living. It is indeed the ideal mutually rewarding program.²

¹Ibid.

²Sharp, loc. cit., p. 14.

The children are encouraged to reach out to new experiences that are both painful and enjoyable. To assure some degree of success, the student volunteers give them all the support they can by giving of themselves in small group situations with definite limits, program, and structure.

Also, because the volunteers are young people, they maintain a greater and constant source of energy necessary to catalyze the percipitation of growth in areas where it has not had a chance to take place, as will be described in the next chapter. Also, the teenagers, as opposed to the adults, have the unique advantage of being closer in age to the child. The teenager, therefore, is more likely to participate informally and spontaneously in activities related to the child's interests, the activities serving as vehicles for growth.

The patient-volunteer relationship is activity oriented in both the Children's Psychiatric Center and in voluntary Domestic Peace Corps programs. Volunteers are encouraged to provide recreational activities and short trips to the community. As previously stated, providing meaningful small group experiences of therapeutic value through group activity is the basis of the psychiatric social group work program at the Children's Psychiatric Center. Helen Reinberz supports the idea that activities

not only have greater ego building values in themselves, but also provide an easier way for the children who have much difficulty in building meaningful relationships.¹ The student-volunteer must be strong enough and always willing to give without immediate reward. This calls for a sense of self-confidence and security on the part of the student. The volunteer must also possess some skill (playing games, singing, doing arts and crafts, and etc.) through which a therapeutic one-to-one relationship can be formed with the child-patient. The volunteer is to provide individualized attention and a personal relationship on a group basis, and thus further the emotional development and social adjustment of the child.

Student-volunteers are of value to the Center's psychiatric social group work with children because of their suitability as figures for identification, as further advocated by Reinberz. The emotionally disturbed child grapples with many problems of identity. The volunteer's youth enables him to be particularly sensitive to many of the child's struggles and needs.

These are the four reasons the Children's Psychiatric Center relies so extensively on the use of student volun-

¹Reinberg, loc. cit., p. 141.

teers as enrichment personnel in the psychiatric social group work program.

The Children's Psychiatric Center's major objective is social recovery, helping the patient return to the community. The Center, individual student-volunteers, and community all profit from the student-volunteer training program.

The Center serves a dual role by utilizing volunteers. It relates the community to the agency and the agency to the community. The Center trains its volunteers through supervised direct service. In such a manner, the community becomes more aware of the agency's needs, efforts, and accomplishments. This is important because mental health is a public concern, not just the concern of a selected few. The community has a responsibility of helping the mentally ill recover and to take their rightful places in the community. At the same time, the mental health agency becomes more aware of community interest and efforts. The more conscious the community and agency are of each other, the more cooperatively they can work together for the good of the convalescing mental health patient. Concurrently, the Center's training of volunteers adds to the development of community leaders, who are necessary to help the community carry on its functions.

For participation in a desirable community activity, the volunteers also gain social approval and esteem just as do employed workers.¹

Felice Perlmutter and Dorothy Durham discuss other benefits that the students receive by serving as volunteers to supplement social group work services. The experience 1) provides an opportunity to fulfill an important social role, 2) serves as support to the student's quest for a sense of uniqueness and personal identity, 3) helps them to focus on giving rather than receiving, thus providing steps toward the development of emotional maturity, 4) helps them to develop a sense of relatedness, and 5) serves as an opportunity for orientation and introduction to the field of social work.²

The Children's Psychiatric Center has found that the stereotype image of young people begins to change as others recognize the contributions they can make to society.

An important side effect of training volunteers would be the stimulation of interest in careers in the mental health field (e.g., among students at the state college, medical students, etc.), so as to alleviate the

¹Aaron Rosenblatt, "Interest of Older Persons in Volunteer Activities," Social Work, XI (July, 1966), 87.

²Perlmutter, loc. cit., p. 42.

current shortage of trained personnel for state and other programs. This is pointed out in the Center's "Aims, Purpose, Outline of Program." ¹

The mental health programs involving the use of student volunteers referred to in this study show significant findings. These programs, however, differ from the Children's Psychiatric Center's psychiatric social group work program use of volunteers in five respects: 1) its rationales for using student volunteers, 2) its recruiting, interview, and selection process, 3) its structure and systematic use of student volunteers, 4) its type of psychiatric social group work program that is clinically directed and controlled by expert psychiatrists, psychologists, and psychiatric social workers, and 5) its complete and sequential use of orientation, supervision, and evaluation periods purposefully planned to strengthen and successfully carry out the goals of the Center's program. It is the use of supervision to which the final part of the review of literature will specifically refer.

Historically, professional social group work supervision of volunteers was introduced in community centers and settlement houses. In this study, in this psychiatric

¹ "Aims, Purposes, Outline of Program" (Children's Psychiatric Center, Trenton State Hospital, Trenton, New Jersey, 1965), p. 7. (Mimeographed.)

residential center, the professional supervision provides the fundamental core of the effective use of student volunteers at the Children's Psychiatric Center. It is a complex social system; it is planned, based on psychiatric principles, and highly developed and structured. The supervision of volunteers has a specific work pattern. The use of volunteers in psychiatric social group work officially introduces volunteers into the orthopsychiatric team. To accomplish this, carefully screened volunteers work in clinically prepared groups, supervised by psychiatric social group workers. In this work pattern, the supervisor's unit of work is the volunteer, while the volunteer's unit of work is the group and the children who compose the group. Their combined activities take place in the larger orthopsychiatric team under leadership of child psychiatry. Within this work unit, as described, the activities of the supervisor of psychiatric social group work and selected volunteers are characterized by a definite work pattern. In this psychiatric social group work pattern is included supervisory work in terms of relationships, structure, program, and limits.

Very few volunteers come to the Center with experience to work and the capacity to give. What the volunteers do possess and have to offer to the program can be further developed through supervision. The Center refers to it as

clinical supervision because it focuses on the better use of one's self when aiding in the treatment of the mentally ill children. Though there is no concrete pattern of the supervisory process, the supervisor must know what the volunteer is doing as a group counselor, and they both plan for the development of the volunteer through more effective use of himself, and plan for the further development of the individual group members and the whole group. The supervisor helps the volunteer become more aware of his weaknesses and how they effect the group, and the expectations and behavior of the group. The supervisor also provides support of the volunteer's strengths and how they can more effectively be used. Referring to the purpose of the supervisor, Irving Spergel states that:

The purpose of the supervisor is not to augment the threat to the worker's ego, but to assist him to maintain intact, and even enhance, his sense of self-worth, self-esteem, and self-respect in relation to his role performance. The objectives of supervision are enhancement and control of the worker's role and not treatment of the worker's personality at the ego or any other level.¹

The supervisor at the Center uses, as he sees best to do so, agency outlined group and individual records. The supervisor also discusses with the volunteer his feelings

¹Irving Spergal, "Role Behavior and Supervision of the Untrained Group Worker," Social Work, VII (July, 1962), 73.

concerning what he did and/or did not do as shown in the records, and his own observations of the volunteer's performance within the group as the counselor. Reports of other supervisors about the volunteer's potentials and performance are also available for use in supervision.

The supervisor realizes that people vary in the level of development of the different areas of providing and utilizing purposefully program, structure, relationships, limits, and controls. An effective volunteer group counselor is one who can adequately use one of the before mentioned points, through regular supervision, to further the social advancement of the individual child-patient and group. As previously stressed, the use of relationships is particularly important to the psychiatric social group work program. Poor use of relationships is one of the primary reasons for discontinuing volunteers from the program.

The focus of the conference is kept flexible: major problems dealt with at the particular time they are diagnosed. The supervisor starts with the volunteer as he shows himself to be in the diagnosed problem area(s) of either providing program, establishing relationships, setting up and working within a structure, or establishing group and individual limits and controls. Beginning where

the individual, group, or community is one of the tenets of the social work profession. As Pergel points out in his study of the role behavior and supervision of the untrained group worker, the worker does bring with him certain configurations of attitudes and perceptions.

The untrained worker approaches his role in the group service agency on the basis of knowledge, skills, attitudes, and expectations for his agency behavior developed in a variety of previous social situations: family, school, job, recreation, and so on. He may be influenced, sometimes strongly, by orientations learned in role situations similar to those which he perceives he will encounter in the agency.¹

The supervisor also brings to the relationship a set of attitudes and perceptions of his own role. He is a trained, experienced, professional social worker. Because of the different levels of perception and understanding they both bring to the relationship, there may be problems of initial communication between the worker and the volunteer. To help establish a working relationship and delineate the possibility of such problems, the supervisor must initiate certain priorities:

The supervisor must facilitate communication and work toward development of a common set of perceptions with the worker as to what is expected of the latter in his role performance.

The supervisor also begins to use the worker's role performance in earlier situations to establish connections with present agency expectations

¹Ibid., p. 69.

. . . . the supervisor communicates with usefulness of the worker's previous experience and training within a current agency frame of reference.

The supervisor opens the channels of communication By regarding the worker's perceptions closely and carefully, the supervisor is in a better position to plan realistic strategies for control and influence of his performance. The major task of the supervisor, to prepare for induction of the worker into his¹ prescribed agency role, is thereby facilitated.

In clinical supervision, the supervisor goes into more depth, and with varying degrees, at the different levels of the program in aiming for a better use of self. This differs from supervision of community center programs. The more time spent in supervision and the more depth involved, the more effective the program.

Supervision is a mutual growth for both the supervisor and the volunteer. Through the use of relationships established by the supervisor, the volunteer can grow and change. The other factors, program, structure, limits and controls, are used to facilitate better usage of supervisory conferences.

The review of the literature supports the idea that high school and college student volunteers can make valuable contributions to the Children's Psychiatric Center social group work program, and to the mental health field in general, as enrichment personnel. The study of the Voluntary

¹ Ibid., p. 70.

Domestic Peace Corps experimental program points out that improvements in the children's personalities take place when volunteer high school and college students are used consciously.

" . . . some children with behavioral disturbances almost reaching psychotic proportions improved greatly when assigned to individual child care worker /volunteers/ with only modest professional and educational backgrounds, who were aided by very brief supervision and guidance by one of the authors.¹

Thus, positive findings of studies reviewed in this chapter strengthen and support our assumption that intelligible young people on the high school and college levels can be used successfully, under supervision to provide enriched therapeutic experiences in a mental health program such as the psychiatric social group work program, Children's Psychiatric Center, Trenton State Hospital, Trenton, New Jersey.

Chapter 3, Presentation and Analysis of the Data, will focus on the description and exploration of student-volunteer aptitude and personality characteristics so as to develop a more meaningful and comprehensive picture of the characteristics differentiating the accepted student-volunteers from the rejected ones.

Statement of the Problem

This study was designed to analyze those characteristics of the high school and college-student volunteers which can be identified in the application procedure and that can be used as predictable guides for performance useful to the

¹ Close, loc. cit., p. 94.

psychiatric social group work program at the Children's psychiatric Center at the New Jersey State Hospital, Trenton, New Jersey.

Purpose of the Study

The purpose of this study was to analyze the characteristic determinants of high school and college student-volunteers utilized in the application procedure to determine their acceptance and rejection for the psychiatric social group work program.

More specifically, the basic assumptions were that:

1. Student-volunteers make a vital contribution to mental health programs;
2. This indicates that persons utilizing the social group work technique in any setting (mental health) must possess certain personality characteristics before they can be considered effective workers in the program;
3. These characteristics are identifiable during the application interview providing it is appropriately structured and discriminately applied;
4. And that as a result of a professional evaluation of these personality characteristics, a reliable prediction of performance can be made, thus, forming the basis for the acceptance or rejection of the student-volunteer applicant.

The results of this study will be very beneficial to the psychiatric social group work staff and patients at the Children's Psychiatric Center at the New Jersey State Hospital, Trenton, New Jersey. First, the findings will be

employed to point up areas of need in the interview procedure and selection process, if any. Secondly, the findings will be used in the orientation of the interviewer staff workers to foster clarity and more homogeneous methods utilized. Thirdly, the study will be used to support the department's continued sponsorship of the program. Fourthly, continuation of the program as described will further enrich the experiences of the children through their interaction with these more carefully selected student-volunteers. And lastly, the findings will be submitted along with other agency material to the federal government describing the total set-up.

Method of Procedure

This is an exploratory descriptive study aimed at identifying the characteristics of the accepted volunteers that significantly differentiated them from the rejected volunteers. Thus, pointing out characteristics that may form relatively sound guidelines to be used in the interview procedure and selection process to winnow out the most acceptable student-volunteers for the psychiatric social group work program at the Children's Psychiatric Center at the New Jersey State Hospital in Trenton, New Jersey. This objective is researched in this study by describing the specific variables and their frequency of

occurrence in the population.

As stated, this study was initially undertaken as a group thesis project, but a separation of the population, presentation, and analysis of the findings was necessary. Therefore, the reader is referred to the study by Miss Bonnie Faye Pryor who has reported on the college student-volunteers. This presentation and analysis will only describe the high school student-volunteers.

The data collected for this study is from the Children's Psychiatric Center's psychiatric social group work department's student-volunteers' application records as described in APPENDIX A. The years September, 1965 - January, 1966, covered the full length of time since the conception of the utilization of the high school and college student-volunteers in the Center's group work program up to the exploration of this paper.

The writers studied the total population of high school and college students who had volunteered for junior and senior counselor positions in the therapeutic social group work week night (fall and spring sessions) and summer camp programs. Guidelines for gathering pertinent information for reaching the proposed objectives were drawn up by the agency's social work supervisors and studied for clarity and significance with the writers.

The schedule of items was designed to collect data from the applicants' personnel sheets, such as, their personal and social characteristics including their previous group experiences and program skills, the interviewer's comments, and the interview decision as these were given special attention in the applicants' selection processing (See APPENDIX D).

The writers formulated a system of coding which classified under general categories the many and varied types of previous group experiences and program skills enumerated by the applicants on the personnel sheets. Since the writers were not familiar with nor able to find an existing standardized coding system which could be utilized in this study, there was drawn up such a system. The coding system of general categories for the study was studied by the advising supervisors along with the random sampling of the personnel sheets by the writers to determine the inclusiveness of the general categories and to establish, as needed, itemized sub-divisions for each board heading. However, when there was realized a subsequent need for sub-divisions during the investigation and recording of the applicants' information, then additions were made after deliberation by the writers (See APPENDIX E).

During the investigation and recording of data, the writers were confronted with the problem of a lack of recorded information which was to be listed under the interviewer's comments (his impressions) and the interview decision which made known the applicants' status, e.g., whether the applicants were accepted or rejected with reasons for each. Therefore, it was decided that the writers should conduct interview sessions with the interviewing supervisors of the social group work department. The limitation of human recall for the many applicants, the time interval, and the staff changes of interviewing supervisors were taken into account so that unless relative sureness of recall was felt by the supervisors, then the applicants' characteristics were not described, but the department's dispositions were recorded. When such materials were listed on the application, then no such hindsight impressionistic interview comments¹ were recorded. The writers found that the summer and fall, 1966-67, records were much more complete. In the latter case, all interviewers were much more aware of such needs as this study had been undertaken and described to them.

¹The interviewers had to resort to their indistinct or indefinite remembrances of the applicants' characteristics as were initially perceived during the interview.

Also the writers were involved in the fall, 1966-67, period as interviewers.

The writers' familiarity with the interview procedure and content enabled them to identify the information drawn from the interviewer comments and follow-up hindsight impressionistic interviews that fell under the particular categories of characteristics as suggested by the group work supervisors. The categories of characteristics included self-confidence, spontaneity, likeability, independence, overt and covert agreement, coherence, elatedness, tolerance for aggression, and for sexuality, and relationship. The negative components of these characteristics were also given consideration by the writers. Special categories were set up to cover a lack of such recorded information, follow-up interview comments, and descriptive information, such as, "Interviewer Did Not Remember," "Self-elimination," "Experimental and Non-experimental," and so forth. Descriptive definitions of these characteristics can be found in APPENDIX A. These categories of characteristics will be utilized to make possible a report of the similarities and differences of the accepted and the rejected student-volunteers which should point out the selection

process and discriminating characteristics for each.

To finalize the collection of data, the writers gathered the evaluation information for the accepted student-volunteers compiled upon the completion of the summer camp period (June-August, 1966) and of the fall, 1966-67 period. No such records were made available of the fall and spring, 1965-66 period. However, the writers were told that students with good to excellent ratings were given first priority for the Summer Day Camp positions and thus would indicate their probable previous evaluations. The purpose for which the evaluative information was collected was to make possible a comparison between the initial interview potential rating for the student-volunteer and the final performance rating for him submitted by the group leaders of the particular groups with which the individual student had acted as counselor. Hopefully, this comparison will yield some information concerning the accuracy of the interviewer ratings as utilized in the selection process of acceptable student-volunteers for future use in the program. Thus, the study will have reached its proposed objective of analyzing the characteristic determinants of the student-volunteers utilized in the application procedure which fostered their selection status and performance prediction. If, however,

the findings do not support the objectives, then the writers feel that the study will point up the need for a more extensive study and the development of an interview schedule which will more accurately discriminate and predict what type student-volunteers will be most acceptable and useful in future student assistant social group work programs at the Center.

Scope and Limitations

The writers studied the total population of high school and college student-volunteering for counselor positions in the psychiatric social group work program at the Children's Psychiatric Center at the New Jersey State Hospital, Trenton, New Jersey. The agency's personnel student-volunteer application records were utilized covering the periods of September, 1965 - May, 1966; June-August, 1966; and September, 1966 - January, 1967. The total number of accepted and rejected applicants contained in the agency's file were 244. However, because of insufficient responses on the application and lack of sufficient information pertinent for this study, the writers excluded six such applicants, resulting in 238 applicants making up the population to be studied. Included in this number were 19 students who were repeaters, but were only included once in this study as their application characteristics were unchanged. They

were interviewed only once, and their work performances from the previous work period were positive (possible evaluation rating).

The writers proposed to study the characteristics of these students to see what identifiable variables could be used as predictable guides in discriminating between the acceptable and rejectable student-volunteers for future selection utilization by the social group work department. A study of these variables and their frequency of occurrence are undertaken in Chapter III. The study concludes with Chapter IV which presents the summary and conclusions along with implications of the data findings and recommendations for future study of the agency's selection of such student-volunteers.

The identified limitations inherent in this study are as follows:

The interviewers did not have a definite interview schedule, but made known their individually designed interview structure as described in the appendix. However, each emphasized the same areas of program concern.

The interviewers did not see that applicants completely filled in their personnel sheets, nor did the interviewers complete the interviewer comment sections. Also all application dispositions were not recorded on the personnel

sheets.

The hindsight impressionistic interview comments are questioned because of the number of applicants without recorded interview comments, the laps of and length of time, and the necessity for human recall involved.

The writers arbitrarily placed some students in categories of characteristics because of the overlapping characteristics identified for the applicants by the interviewer either on the application sheet or in the follow-up hindsight interview.

Evaluation information for the applicants during the September, 1965 - May, 1966, work periods was not made available to the writers and is thus not specifically included in this study.

The writers were involved in the interview procedure, but not the selection process. Because of the writers involvement in this study, possibly they were much more involved in guiding the interview content and recording comments. The categories of characteristics were not known to them, however, and the comments are purely impressionistic without being guided by the follow-up material in this study.

The study, although undertaken as a group thesis project, had to be divided to comply with university

regulations. Therefore, since the high school and college student-volunteers are studied separately and in different studies, no comparisons between the two groups were done, but both findings are available for future study. Additionally, the Center will be given both copies of the study for any corrolative study that may be indicated.

CHAPTER II

THE HISTORY OF THE CHILDREN'S PSYCHIATRIC CENTER AND A DESCRIPTION OF THE CENTER'S SERVICE PATTERN

Children's Psychiatric Center is a residential psychiatric treatment program for seventy-five children from six to fourteen years of age. It was established in 1964 as an adjunctive service to the New Jersey State Hospital, Trenton, New Jersey. Children in the Center are admitted to the hospital because of psychiatric illness. They are from the hospital catchment area which includes the eastern half of Essex County, Hudson, Hunterdon, Mercer, and Warren Counties. The program in the Children's Center is composed of a children's psychiatric clinic, a milieu in which the children live, and a psycho-educational program, all integrated under the leadership of a child psychiatrist. The Children's Psychiatric Center is an active member of the American Association of Psychiatric Clinics for Children.¹

In July 1964, members of the regular hospital staff and the professional staff of the New Jersey Mental Health

"Aims, Purposes, Outline of Program" (Children's Psychiatric Center, Trenton State Hospital, Trenton, New Jersey, 1965), p. 1. (Mimeographed.)

Center, Trenton State Hospital, merged to render a treatment program with specialized training and experience in Child Psychiatry, thus, the formation of the Children's Psychiatric Center. As early as April 1964, the New Jersey Mental Health Center had oriented itself to the hospital by starting to clinically study some of the hospitalized children.¹

In 1965, the staff found, by careful clinical study, many children within the population could be moved from the hospital to a more appropriate resource with only a minimal amount of rehabilitative work. During 1966, the rehabilitation problems and the scarcity of adequate placement facilities had come more to the fore. Moving the children out of the hospital had become much more difficult. Eventually, advancements were made. The Children's Psychiatric Center believed this to be the result of more careful staffing and attention given to the child's needs than was possible in 1965 when the ward staff and professional staff were not so well integrated. They felt that a unique pattern of operations had begun

¹Robert B. Pomeroy, M.D., Annual Report, July 1, 1964-June 30, 1965. A report summarizing the first year of operation in the Children's Psychiatric Center, Trenton State Hospital, November, 1965, p. 1. (Mimeographed.)

to emerge.¹

The Children's Psychiatric Center has a hospital improvement grant financed by the National Institute of Mental Health. The following paragraphs are excerpts from the Trenton State Hospital's application for the NIMH grant. They state the aims of the proposed program and its design to meet the needs of the institutionalized children as studied in 1965.

This project is designed to improve the treatment program for children at Trenton State Hospital. This goal is to be achieved by (1) expanding existing programs, (2) introducing new treatment techniques.

Our program goals are to carry on an active treatment program to facilitate the early release of children into the community, and to provide those additional services to the child, his family, and the community which prove to be necessary in order to enable the child to function following his release from the hospital. It is the expectation that the Children's Psychiatric Center program will strengthen the coping powers of emotionally disturbed children while in residence at the hospital so that they are ultimately enabled to make a better community adjustment with the support of existing community facilities. In this sense the Center is forging a new link in the chain of community facility service patterns. This aim is consonant with the charge by the State Board of Control not to duplicate existing

¹Application for National Institute of Mental Health Grant, June 1, 1965 - March 1, 1966 (Children's Psychiatric Center, Trenton State Hospital, Trenton, New Jersey), p. 6.

facilities.¹

The Center's service pattern for the children is highly structured, formed by an orthopsychiatric team and the para-medical personnel. All services are integrated under the direction of a child psychiatrist.

The service begins when each new child is assigned to a psychiatric social caseworker at admissions. It is the responsibility of the caseworker to carry on-going responsibility for the child, family, and related community agencies, both during and after discharge.

Others of the intake-treatment team include a child psychiatrist, clinical psychologist, and nursing personnel representatives. This team sets up a clinical estimate of the child and his situation usually within a week of his entry into the Center. Following this, the director of the Center involves a larger team consisting of all persons having responsibility for some aspect of the total program which is being developed for the child. Each admission is presented at a diagnostic conference. Usually present at the diagnostic conferences are: child psychiatrist, clinical psychologist, pediatrician, social caseworker, occupational therapist, social group worker,

¹

Ibid., pp. 5-6.

school principal and teachers, head nurse and ward staff who work with the child. It is at this time that the child is assigned to the various treatment services, thus, the formal treatment program for the child is set.

The team coordinates and keeps flexible the focused goals of the on-going program for the child. It meets at any time a problem about the child arises. It has responsibility for changing the child's program if required.¹

A series of clinical team conferences are held during which each member reports on his contact with the child. Attending these conferences are the child psychiatrist, clinical psychologist, and nursing personnel representatives. Reports from the members form the bases for decisions on treatment and disposition. As soon as the team feels reasonably clear about a child's functioning and his use of program, it becomes the treatment team social caseworker's responsibility to schedule the child for a regular full diagnostic staff.

This staff meeting has proved to be one of the major factors in maintaining a totally integrated program for each child. This is especially important since our population by and large have impairment of their integrative functioning. We have come to regard ego as a group of functions, which unless supported by a total milieu, do not coalesce. Formulations stress the strengths of the child and emphasize his growth potential.

¹ Ibid., p. 7.

Final formulation consists of assessing services we are able to provide and the services the child needs in order to derive a total plan¹ geared to releasing the child from the hospital.

The Use of Student Volunteers in the Psychiatric
Social Group Work Program

The 75 children from 6-14 years of age, comprising the patient population, have a diagnosis in one of three categories as reported by the Center: 1) deprivation syndrome including character disorders, 2) childhood autism, and 3) neurological impairment.

The Center's treatment goal for the children is social recovery, not cure. The Center focuses on providing an active and comprehensive therapeutic program that will enable the child to return to his family and community as soon as his convalescence allows. The goals and structure for each child are carefully defined using fundamentals of social work practice.

The Children's Psychiatric Center's purpose is to bridge the gap between institutionalization and community. One way of moving towards this goal is the utilization of the small group experience. This one method will primarily be the use of socialization through activity (games, crafts, discussion, etc.) in the small group situation under professional supervision. We will try to provide a setting for our children that will enable them to find, in small group participation, the things that will lend themselves

¹Ibid., p. 9.

toward a richer and fuller life. New friendships, stimulating and exciting new experiences, sharing things with others, getting experiences in outside living, being the leader, the follower, and being allowed to make decisions are the things that will develop a security and a feeling of status so necessary for the growing child who must learn to live and contribute to a real world.¹

Psychiatric social group work is a major treatment modality utilized in the Center's program. Other services include a child guidance clinic, a therapeutic milieu, a psycho-educational program, and an occupational therapy, all integrated under the leadership of child psychiatry.

The psychiatric social group work program is structured to provide the children with realistic socializational experiences in small groups lead by counselors under professional supervision.

Every child in the Center is assigned to a group; assignment is made in consultation with clinical and ward staff and teachers. Groups range in size from three to eight children, depending on their level of functioning; children progress to more maturely functioning groups as their socialization experience indicates.²

In cases where the number of children exceeds this limit, additional counselors are added.

To extend the program, the psychiatric social group work

¹"Student Staff Manual" (Children's Psychiatric Center, Trenton State Hospital, Trenton, New Jersey, 1965), p. 3.

²Taylor, loc. cit., p. 1.

department includes volunteer high school and credit college students working under professional supervision. It is important to state that they are not used as substitutes for regular salaried staff, but rather as enrichment personnel. The students must be screened, interviewed, and recommended by professional staff before they become part of this program. Afterwards, they are oriented to the function and purpose of psychiatric social group work and their roles in the program. The students are assigned to groups as either senior or junior counselors coordinated by close supervision from professional staff.

It is the firm belief of the Center's psychiatric social group work staff that selected students can provide opportunities for the children to form enriched interpersonal relationships through interaction with the students in a structured group working in an informal climate. These relationships are quite different from those formed with staff. Patient-worker interpersonal relationships are of vital therapeutic value, but they are most effective when the volunteer is supported with regular, on-going supervision by professional personnel.

A number of the children have been deprived of close and meaningful relationships, or they have experienced destructive relationships before coming to the Center.

The positive relationships that volunteers afford also serve as a catalyst for the children: to precipitate growth in areas where it has not had a chance to take place. The children have emotional difficulty or they just do not know how to talk about what they want, think, feel, thus, showing a definite weakness in the ability to appropriately express themselves. Among the children, there appears to be a gap in possessing a sense of self and the ability to relate to others. In this respect, limits serve as a trellis for their reaching out and growing. The use of limits is one of the cornerstones of the psychiatric social group work program. They serve as supports in favorable ways to help the children reach out. Limits are used as a therapeutic tool rather than as a punitive measure to which many of the children are accustomed. A significant amount of the damage seen in the emotional and social development of the children has come from adults in their lives. The small therapeutic groups present protective situations for the children; they are able to learn to feel freer to move with siblings or peers without threat of an adult figure. Many of the children admitted have been seriously deprived of desirable child rearing practices. The aim of the volunteer here is to help the child compensate for his many emotional and social deprivations and to build a capacity to relate to other people in an appropriate

manner.

The volunteers bring with them enthusiasm and creativity, which they transmit to the children.

From the relationship between leader and group, an intangible quality seems to emanate. Dissatisfaction with being in a state hospital, a desire to learn and experiment socially (eating and going out), striving for more than the status quo, in general not being satisfied, but rather reaching out through both the painful and enjoyable experiences of life, seems to be one of the driving forces that helps a child move toward a new readiness to leave the Center and go back to family and community.¹

The psychiatric social group work department has found student-volunteers possessing certain attributes and personality characteristics that are most useful and effective in the program. As stated in the before mentioned Newsletter, in the group, the child can identify with both peers and adults on many levels. It seems a mutual growth process takes place as both the leader and the children become stronger and are able to move out socially in many ways.² Since the beginning of the program, seniors from local high schools and preparatory schools have served as group junior counselors. College and university students from nearby colleges serve as senior group counselors. Each student is assigned to a full-time staff member for weekly supervision. Student leaders are assigned to groups with whom they meet weekly for planned activities, all clinically

¹ Ibid., p. 2.

² Ibid., p. 1.

focused. (For an outlined description of the Center's non-professional group services program and student staff responsibilities, see APPENDIX G.)

Many students apply, but only a small number of these are selected. The selection process, then, must be realistic and discriminating enough to identify appropriate and inappropriate students. Certain realities such as basic qualifications, educational level, time available, transportation, realistic perception of the tasks involved, and the condition of the candidate's health, are identified and evaluated. But what other basic characteristics must the interviewer look for when interviewing an applicant and for basing his recommendations for acceptance or rejection? In view of past uses of volunteers, some who were accepted into the program were considered to have done well, and others who were accepted were not considered to have done well. However, APPENDIX H shows the performance curve of counselors selected to be weighted on the upper end of the scale, therefore, the selection process used has significant reliability.

What were the characteristics that made the difference between the two groups of accepted volunteers? What did each of them have in common? Could there have also been a possibility that others who were not selected might have

been useful to the program had our selective procedure been more discriminating? Can there be a selection procedure for estimating student applicants so as to effectively winnow out those who cannot successfully be utilized as counselors in the Center's psychiatric social group work treatment program? Can we also use this procedure to point out those who can be utilized? It is the purpose of our study to see how in our experience we answered these questions, or provided the groundwork for further investigation into this concern.

CHAPTER III

PRESENTATION AND ANALYSIS OF DATA

This study was designed to analyze those characteristics of the high school and college student-volunteers that can be identified in the application procedure, and that can be used as predictable guides for performance useful to the psychiatric social group work program at the Children's Psychiatric Center at the New Jersey State Hospital, Trenton, New Jersey.

As stated, this study was initially undertaken as a group thesis project, but a separation of the population, presentation, and analysis of the findings was necessary. Therefore, the reader is referred to the study by Miss Bonnie Faye Pryor who has reported on the college student-volunteers. This presentation and analysis only describes the high school student-volunteers.

The data was collected from the Children's Psychiatric Center's social group work department's student-volunteers' application records from September, 1965 - January, 1967, and from follow-up impressionistic interviews with the staff supervisors conducted by the writers.

The total population of students who volunteered for

junior and senior counselor positions in the social group work program was studied. The methods employed to gather the needed information were (1) a schedule guide for gathering the pertinent personal characteristics, skills, previous group experiences, interviewer's comments and interview decisions, (2) a system of coding by which to classify these items, and (3) a collection of pre-ratings and post-ratings (performance evaluations) by which to make indicated comparisons.

For the purpose of investigation, each person in the student-volunteer group was placed in one of two classes: Accepted and Rejected. According to Helen Walker, a two-class population is called a dichotomous population.¹ For this investigation, when James Doe (D., J.) is drawn into the study, we are not interested in all of his personal attributes, but only in whether he belongs in the class of the accepted (A) or the rejected R), and the designated characteristic determinants which so determined this status. Thus, the population is the total of all observations A and R.

As identified in the review of the literature, stu-

¹Helen M. Walker and Joseph Lev, Elementary Statistical Methods (New York: Holt, Rinehart and Winston, 1958), p. 203.

dent-volunteers and in the gathering of pertinent information, a composite of variables utilized in this study and an account of their frequency of occurrence in percentages will be described in relation to the following categories: sex, age, school, skills, experiences, personality characteristics, and pre and post-ratings. The utilization of tables have been employed for the purpose of presenting the findings.

For purposes of statistically representing and analyzing the student-volunteer characteristics, aside from sex, age, and school, categories were set up and a system of coding the categorized characteristics was devised. The following shows the broad categories covering pertinent personality characteristics dealt with in this study, and the equivalent system of coding. Also illustrated are rating scales for predictions of student-volunteer performance made during the interview, and their actual performance evaluations given at the end of the work period:

Attitudes and Attributes (Skills) - Group Work Experience

Athletics and Sports	a	Recreational Settings	1
Musical Talents	b	Settlement	2
Clerical	c	Institutional	3
Dramatics and Creative	d	Baby sitting	4
Writing		Other	5
Foreign Language	e		
Arts and Crafts	f		
Mechanical Skills	g		

Performance Predictions and Performance
Evaluation Scales

Excellent
Excellent-Very Good
Very Good
Very Good-Good
Good
Good-Fair
Fair
Fair-Poor
Poor
Deferred
Unknown

For more detailed definitions of personality terms, and further breakdown of what is included in each of the sub-categories of Group Work Experience and Attitudes and Attributes or Skills (See APPENDIXES E and F).

Graphs show the extent to which the performance of the accepted student-volunteers might be predicted from certain attitudes that might be assessed from the application sheet and interview content (See APPENDIX H). Also shown is the actual performance ratings which are given after the completion of the particular work period, e.g., fall, spring, or summer period programs.

Sex

A review of the literature has supported the assumption that intelligible young people on the high school and college levels can be used successfully, under supervision, to provide enriched therapeutic experiences in mental health programs. The student-volunteers are not used as

substitutes for regular salaried staff, but rather as enrichment personnel for the purpose of extending the program. The students must be screened, interviewed, and recommended by professional staff before they are included.

Many students from the surrounding high school and college communities apply for a position in the psychiatric social group work program, Children's Psychiatric Center. Only a few, however, can be used. Of the 238 student-volunteers who applied for acceptance into the program, beginning September, 1965 through January, 1967, eighty-two (82) were high school students, as totaled in Table 1.

TABLE I

NUMBER OF HIGH SCHOOL MALE AND FEMALE ACCEPTED
AND REJECTED STUDENT-VOLUNTEERS

	Number of Student-Volunteers					
	Male Number	%	Female Number	%	Total Number	%
Accepted	37	66.07	19	33.93	56	= 100
Rejected	7	26.92	19	73.08	26	= 100
	44	53.56	38	46.35	82	= 100

Fifty-six (56) of the student-volunteer applicants were accepted into the psychiatric social group work program, leaving twenty-six (26) who were rejected.

Of the percentage high school student-volunteers who were hired, nearly two-thirds of them were males and one-third females. Compared with those males and females who were rejected, approximately three-fourths of them were females and approximately one-fourth males. The table also illustrates that there was a greater proportion of accepted males (37) over the rejected ones (7), whereas the number of accepted and rejected females was the same. None of the thirty-seven males worked in the summer camp program.

Though there was not a great difference between the total number of high school males and females who applied (a difference of six), the majority of those accepted were males, and the majority of those rejected were females. A reason for the necessity of more male student-volunteers was that they were needed as figures for male identification for the boy-patients. The Center has four boy-patients to every girl-patient.

Age

The youthfulness and degree of maturity of the volunteers were prime factors in the choice of using high school

and college students as volunteers. As pointed out in Chapter 1, advantages of using young people, as related to providing enriched psychiatric social group work services, are: 1) they maintain a greater and constant source of energy necessary to catalyze the precipitation of growth in areas where it has not had a chance to take place, 2) they are closer in age to the children, therefore, they are more likely to participate informally and spontaneously in activities related to the children's interests, 3) they are suitable as figures of identification, and 4) their youth enables them to be particularly sensitive to many of the children's struggles and needs.

Table 2 shows the distribution of ages of the accepted and rejected high school male and female student-volunteers.

The age range of the volunteer applicants was fifteen (15) to nineteen (19) years. Only one fifteen-year-old applied and she was rejected because she was too young.

The greater percentage of both accepted and rejected student-volunteers were between ages seventeen (17) and eighteen (18). Ages seventeen and eighteen are typical senior high school age ranges; therefore, the percentage of those accepted and rejected would normally fall within this range.

TABLE 2

DISTRIBUTION OF AGES OF ACCEPTED AND REJECTED
HIGH SCHOOL MALE AND FEMALE STUDENT-VOLUNTEERS

Ages	Accepted						Rejected					
	Male (37) ^a		Female (18)		Total (55)		Male (7)		Female (18)		Total (25)	
	No.	%	No.	%	No.	% ^b	No.	%	No.	%	No.	% ^b
15	...	...	...	...	...	...	...	...	1	5.50	1	5.50
16	2	5.4	...	...	2	5.4	...	...	3	16.66	3	16.66
17	18	48.8	8	44.45	26	83.25	4	57.15	6	33.33	10	90.48
18	13	35.0	10	55.55	23	90.55	3	42.85	7	38.88	10	81.73
19	4	10.8	...	...	4	10.8	...	...	1	5.50	1	5.50

^a Numbers in parentheses represent the total of participating Accepted Males, Females, Total, and Rejected Males, Females, Total Student-volunteers. The table is based on these totals.

^b Sums of percentage Males and Females; not percentage of Total Accepted or Total Rejected.

The total numbers of accepted seventeen and eighteen-year-old student-volunteers, however, was more than half the total numbers of rejected seventeen and eighteen-year-old student-volunteers.

There were few nineteen-year-old student-volunteers accepted, and even fewer sixteen-year-olds. This also held true for the rejected student-volunteers.

Schools

The high school student-volunteer applicants came from public, private, and male preparatory schools in the Trenton and Princeton, New Jersey, and New Hope, Pennsylvania, areas.

One of the Center's rationales for using nearby student-volunteers is because they represent an active interest in the community. Today's high school and college students stand in the forefront in calling attention to and in actively engaging in helping society rid itself of crucial social problems. The students, being representatives of the community, help the community become more aware of the need for and results of social action in many areas. They frequently represent and/or able to influence the various sources of community action.

TABLE 3

DISTRIBUTION OF SCHOOLS OF ACCEPTED AND REJECTED
HIGH SCHOOL MALE AND FEMALE STUDENT-VOLUNTEERS

<u>Schools</u>	Accepted						Rejected					
	Male (35) ^a		Female (18)		Total (53)		Male (7)		Female (16)		Total (23)	
	No.	%	No.	%	No.	% ^b	No.	%	No.	%	No.	% ^b
Cathedral	...	...	...	...	...	...	...	...	2	12.08	2	12.08
Ewing	1	2.80	3	16.66	4	19.46	...	...	3	18.75	3	18.08
Lawrenceville	27	77.14	...	...	27	77.14	5	71.42	...	...	5	71.42
Pennbury	...	...	...	...	...	...	...	...	1	6.25	1	6.25
Princeton	...	...	...	...	...	...	...	...	1	6.25	1	6.25
Solebury	7	20.00	10	55.55	27	75.55	1	14.28	3	18.75	4	33.04
Steinert	...	...	2	11.11	2	11.11	...	...	...	...	...	...
Trenton	...	...	3	16.66	3	16.66	1	14.28	6	37.50	7	51.78

^a Numbers in parentheses represent the total of participating Accepted Males, Females, Total, and Rejected Males, Females, Total student-volunteers. The table is based on these totals.

^b Sums of percentage Males and Females; not percentage of Total Accepted or Total Rejected.

Most important of the Center's use of community young people is that the students reveal to the mentally ill children a feeling that the community still cares about them and that it does want them to return.

Table 3 shows the distribution of high schools represented by the accepted and rejected male and female student-volunteers. Of the eight high schools represented, most of the applicants attended the Lawrenceville preparatory school for boys, Solebury, a private co-ed school, and Ewing and Trenton High schools, the city's largest public high schools. These four schools are mentioned in sequential order according to the number of students applying and accepted from each school.

Most of the students came from Lawrenceville and Solebury because those schools had a working agreement with the Center. Lawrenceville and Solebury offered and encouraged, through their academic programs, opportunities for their students to participate in community volunteer activities. Students from these schools became acquainted with the Center's psychiatric social group work program through the recruitment process. Lawrenceville recruited, screened, and oriented its potential student-volunteers. It was through the school's recommendation that they appeared for an agency interview process. The structure of Solebury's recruitment process was similar.

Students from other schools heard about the program from friends, relatives, Center staff members, students who were previously associated with the program, and through recommendations.

None of the students from Cathedral, Pennbury, and Princeton high schools were accepted into the program. Both of the student-volunteers from Steinert high school were accepted. Very few Lawrenceville and Solebury students were rejected. Most of the Trenton students were rejected.

Skills

The goal of the Center is social recovery. To facilitate this, normal socialization experiences for the children are provided through interaction in small, informal, social group work groups. The method used within the groups is activity-oriented, therefore, specific skills are required to effectively carry out the aims of the psychiatric social group work program.

Based on the data provided by Table 4, the most frequently occurring skills among the accepted student-volunteers were athletics and sports (a), foreign languages (e), arts and craft (f), and in that order. The greater percentage of accepted males possessed skills in athletics and sports (a), foreign languages (e), driving an automobile

TABLE 4

DISTRIBUTION OF SKILLS OF ACCEPTED AND REJECTED
HIGH SCHOOL MALE AND FEMALE STUDENT-VOLUNTEERS

<u>Skills</u> ^b (Code)	Accepted						Rejected					
	Male (36) ^a		Female (19)		Total (55)		Male (7)		Female (19)		Total (26)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
a	36	100.00	17	89.09	53	189.09	5	71.03	16	84.04	21	155.70
b	10	27.28	13	68.08	23	95.36	3	42.06	8	42.02	11	84.08
c	11	30.20	10	52.12	21	82.32	4	57.01	9	47.07	13	104.08
d	7	19.16	6	31.11	13	50.27	1	14.02	1	5.05	2	19.07
e	21	58.12	7	36.16	28	94.28	5	71.03	11	57.17	21	128.20
f	14	38.32	13	68.08	27	49.05	2	28.04	8	42.02	10	70.06
g	20	55.20	6	31.11	26	86.31	5	71.03	9	47.07	14	118.10

Numbers in parentheses represent the total of participating Accepted Males, Females, Total, and Rejected Male, Female, Total student-volunteers. The table is based on these totals.

Note: These totals may differ at corresponding points in Skills and Group Work Experience.

Skills are multi-response variables, i.e., a volunteer may have had skills in each category. Example: a, b, c, may be the skills of John Doe, and d, e, may be the skills had by Jane Smith.

and operating a movie projector (g), and skills in arts and crafts (f), each occurring in that order of frequency. As compared with the accepted females, the greater percentage of them listed having athletics and sports (a), musical talents (b) and arts and crafts (f), and clerical skills (c).

Arts and crafts, athletics and sports, musical talents, and driving, and operating a projector, were found to be necessary if the student-volunteer was to be useful to the psychiatric social group work program, Children's Psychiatric Center.

The most frequently occurring attributes among the rejected males were athletics and sports (a), foreign language (e), clerical (c), and mechanical (g). Other than athletics and sports, the most frequently occurring skills among the rejected student-volunteers have not been found to be too necessary to the psychiatric social group work program thus far.

Group Work Experiences

The psychiatric social group work program operates on the assumption that selected students can provide opportunities for the children to form enriched interpersonal relationships through interaction with the students in a structured group. Due to the nature of the program, it is

preferable that the student-volunteers have some experience that would acquaint them with working with children in an informal group setting. The Center, however, does not expect the student-volunteers to have a great deal of experience and know-how in this area. This is the reason supervision is important to the effective rendering of psychiatric social group work services.

Based upon the data presented in Table 5, Group Work Experiences, an assumption emerged from the analysis that there was not a significant difference in the frequency occurrence of group work experiences listed by accepted males and females as compared with the rejected males and females, respectively. Experiences not related to group work (5) were listed most frequently by both the accepted and rejected student-volunteers. A significant percentage of student-volunteers, accepted and rejected, listed their sources of group work experiences as recreational settings (1) and institutional settings (2). A significant percentage of both accepted and rejected males got their experiences through work in recreational settings (1), whereas a significant percentage of both accepted and rejected females obtained their group work experiences from work in settlement settings (2).

TABLE 5

DISTRIBUTION OF GROUP WORK EXPERIENCES OF
ACCEPTED AND REJECTED
HIGH SCHOOL MALE AND FEMALE
STUDENT-VOLUNTEERS

Group Work Experiences ^b (Code)	Accepted						Rejected					
	Male (36) ^a		Female (19)		Total (55)		Male (6)		Female (19)		Total (25)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1	20	55.20	5	25.15	25	80.35	2	33.02	7	36.16	9	69.18
2	1	2.28	1	5.05	2	3.35	...	...	1	5.05	1	5.05
3	6	10.24	10	52.12	26	68.36	1	16.04	14	73.13	15	89.17
4	4	11.04	7	36.16	11	47.20	...	...	8	42.02	8	42.02
5	23	63.32	13	68.08	36	131.40	5	83.02	10	52.12	15	135.14

^aNumbers in parentheses represent the total of participating Accepted Males, Females, Total, and Rejected Males, Females, Total student-volunteers. The table is based on these totals.

Note: These totals may differ from the totals given in Table 1. This is because not all the applicants gave responses.

^bGroup Work Experiences are multi-response variables, i.e., a volunteer may have had experiences in each category. Example: 1, 3, 5, may be the experiences had by John Doe, and 4, 5, may be the experiences had by Jane Smith.

Personality Characteristics

The "borrowed ego" theory and the use of interpersonal relationships are fundamentals of the psychiatric social group work program. The student-volunteers who give of themselves to provide the children with opportunities to reestablish their inter-human and inter-personal relationships must possess the necessary personality characteristics.

Table 6 includes the distribution of the desirable characteristics and their negative counterparts. The table illustrates that of the various personality characteristics, only a few are significant enough to mention.

The personality characteristics occurring most frequently among the accepted student-volunteers are elatedness (L+), openness (C+), and the ability to form appropriate relationships (N+). All are in accord with the aims and purposes of the psychiatric social group work programs. The percentages of these characteristics occurring among the accepted males as compared with the accepted females do not vastly differ; therefore, a significant comparison cannot be made.

The personality characteristics occurring most frequently among the rejected student-volunteers are the inability to form appropriate relationships (N-), spontaneity (B+), intellectual identification (F-). Several of the

TABLE 6

DISTRIBUTION OF PERSONALITY CHARACTERISTICS
OF ACCEPTED AND REJECTED HIGH SCHOOL
MALE AND FEMALE STUDENT-VOLUNTEERS

Code	Accepted						Rejected					
	Male		Female		Total		Male		Female		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
A+	2	2.3	2	3.3	4	5.7	...	...	...	...	...	...
A-	2	2.3	1	1.7	3	4.0	1	5.3	3	6.66	4	11.96
B+	1	1.1	2	3.4	3	4.5	2	10.5	...	...	2	10.5
B-	...	...	...	...	...	...	...	...	...	...	...	...
C+	13	14.8	6	10.6	19	25.4	1	5.3	1	2.22	2	7.52
C-	...	...	1	1.7	1	1.7	1	5.3	2	4.44	3	9.74
D+	4	4.6	2	3.4	6	8.0	...	...	2	4.44	2	4.44
D-	...	...	2	3.4	2	3.4	...	...	3	6.66	3	6.66
E+	4	4.6	4	6.7	8	11.3	1	5.3	5	11.11	6	16.41
E-	...	...	...	...	...	...	1	5.3	1	2.22	2	7.52
F+	5	4.7	4	6.7	9	11.4	...	...	...	...	...	...
F-	...	...	...	...	...	...	2	10.5	...	...	2	10.5
G+	3	3.4	2	3.2	5	6.8	...	...	...	...	...	...
G-	...	...	...	...	...	...	1	5.3	1	2.22	2	7.52
H+	4	4.5	3	5.1	8	9.6	1	5.3	1	2.22	2	7.52
H-	...	...	...	...	...	...	...	...	...	...	...	...
I+	4	4.5	1	1.7	5	6.2	...	...	...	...	...	...
I-	2	2.3	3	5.1	5	7.4	1	5.3	1	2.22	2	7.52
J+	2	2.3	1	1.7	3	4.0	...	...	1	2.22	1	2.22
J-	...	...	...	...	...	...	1	5.3	1	2.22	2	7.52
K+	4	4.6	3	5.1	7	9.7	...	...	...	...	...	...
K-	...	...	...	...	...	...	...	...	1	2.22	1	2.22

TABLE 6 - Continued.

Code	Accepted						Rejected					
	Male		Female		Total		Male		Female		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
L+	17	19.3	9	15.3	26	34.6	1	5.3	1	2.22	2	7.52
L-	2	2.3	3	5.1	5	7.4	1	5.3	2	4.44	3	9.74
M+	1	1.1	1	1.7	2	2.8	...	...	...	...	...	...
M-	...	...	1	1.7	1	1.7	...	...	1	2.22	1	2.22
N+	11	12.5	4	6.7	15	19.2	1	5.3	2	4.44	3	9.74
N-	1	1.1	2	3.4	3	4.5	2	10.5	4	8.88	6	19.38
O	5	4.7	2	3.4	7	8.1	1	5.3	2	4.44	3	9.74
P+	...	...	...	...	...	...	...	...	...	...	...	...
P-	...	...	...	...	...	...	...	...	1	2.22	1	2.22
Q	...	...	...	...	...	...	...	...	5	11.11	5	11.11
R	...	...	...	...	...	...	...	...	3	6.66	3	6.66
S	...	...	...	...	...	...	...	...	1	2.22	3	6.66
V	1	1.1	...	...	1	1.1	...	...	1	2.22	1	2.22

female student-volunteers were rejected because there were no job vacancies (Q). None of the rejected males fell into this category.

It is interesting to note that both the accepted males and females possessed the most frequently occurring characteristics, whereas, the only characteristic both rejected males and females possessed was the inability to form appropriate relationships. (N-). This indicates that the acceptance of student-volunteers based on personality characteristics, was consistent.

Pre-ratings

Predictions of student-volunteer performances were made during the interview process, based on the skills listed, group work experiences listed, and on an observation of the student's personality. Social workers are sensitive to see in other people what it takes to work with emotionally disturbed children. Their judgments are made on the basis of social work values and empathy; therefore, they are open to the subjectivity of the social work interviewer.

As shown in Table 7, the pre-ratings of the accepted student-volunteers occurred most frequently on the upper end of the scale. The pre-rating most frequently used was "good." In comparison, the pre-ratings of the rejected

TABLE 7

DISTRIBUTION OF PRE-RATINGS OF ACCEPTED AND REJECTED
HIGH SCHOOL MALE AND FEMALE STUDENT-VOLUNTEERS

Pre-rating of Potentials	Accepted						Rejected					
	Male		Female		Total		Male		Female		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Excellent	15	13.5	3	15.0	8	28.5	...	...	...	...	...	...
Very Good	3	8.1	3	15.0	6	23.1	...	...	...	...	...	...
Good	15	40.5	8	44.0	23	84.5	2	28.6	2	10.5	4	39.1
Fair	1	2.7	...	...	1	2.7	1	14.3	12	5.3	2	19.6
Poor	...	...	...	...	...	...	...	...	1	5.3	1	5.3
Unknown	13	35.1	5	26.0	18	61.1	4	57.1	15 ^a	78.9	19	136.0
Total	37	100.0	19	100.0	56	200.0	7	100.0	19	100.0	26	200.0

Note: The above table is based on the total population of students who volunteered for the social group work program during the years September 1965-January 1967.

^aIncluded in the 15 is one (1) who was rejected because she was too young.

student-volunteers occurred on the lower end of the pre-rating scale.

A significant percentage of both the accepted and rejected males and females fell into the category "unknown." This was because a great deal of the necessary information was not included on the personnel sheets, so the writer had to resort to the memory of the interviewers for the predictions of performances.

Included in the Appendix is a bar graph showing the data on Table 7. (See APPENDIX H.)

Pre and Post-ratings

Table 8 shows the comparison of the performance predictions and the performance evaluations of the accepted students who participated in the program between June 1966, and January 1967. Performance evaluations of the accepted student-volunteers who participated in September 1965 - June 1966, were not available to the writer.

A significant percentage of these ratings also appear on the upper end of the scale. This may indicate that the expectations set upon the students when chosen were carried through.

APPENDIX H also shows a comparison of the pre and post-ratings.

TABLE 8

DISTRIBUTION OF PRE AND POST-RATINGS OF ACCEPTED
HIGH SCHOOL MALE AND FEMALE STUDENT-VOLUNTEERS

Ratings	Pre-rating						Post-rating					
	Male		Female		Total		Male		Female		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Excellent	4	17.4	...	...	4	17.4	4	17.4	...	...	4	17.4
Very Good	4	17.4	3	33.3	7	50.7	5	21.7	4	44.4	4	66.1
Very Good-Good	...	...	...	...	...	...	3	13.0	2	22.2	5	35.2
Good	...	34.7	3	33.3	11	68.0	4	17.4	3	33.3	7	50.7
Good-Fair	...	...	...	...	...	...	1	4.4	...	...	1	4.4
Fair	...	...	...	...	...	...	2	8.7	...	...	2	8.7
Poor	...	...	...	...	...	...	2	8.7	...	...	2	8.7
Unknown	7	30.5	3	33.3	10	68.8	1	4.4	...	...	1	4.4
Deferred ^a	...	...	...	...	...	...	1	4.4	...	...	1	4.4
Total	23	100.0	9	100.0	32	200.0	23	100.0	9	100.0	32	200.0

Note: The above table is based on the accepted student volunteers who had recorded pre and post-ratings for the work periods June 1966 - January 1967.

^aWork time too short; worked less than three meetings.

CHAPTER IV

SUMMARY AND CONCLUSIONS

The Children's Psychiatric Center at the New Jersey State Hospital, Trenton, New Jersey, was established in July 1964, with the transfer and merging of the professional staff of the New Jersey Mental Health Center and assigned regular hospital staff members. At the outset of the children's program the treatment aim for patients in the Center was social habilitation, not cure. It focused on providing an active and comprehensive therapeutic program that would enable the child to return to his family and community as soon as his convalescence indicated. The seventy-five severely emotionally disturbed, multi-problem children ranging from ages six to fourteen years are provided treatment through in-patient, out-patient, and day hospital programs.

To accomplish social habilitation, among the several treatment modalities used in this program, social group work utilizes professional social group workers to supervise high school and college student-volunteer counselors who work with the children in small groups. The student-volunteers are not used as substitutes for regular salaried

staff, but rather an enrichment personnel. They must be screened, interviewed, and recommended by professional staff before they become part of this program. They make vital contributions to the recovery of patients through the structured programs.

The psychiatric social group work department has found student-volunteers possessing certain attributes and personality characteristics that are most useful and effective in the program. Many students apply, but only a small number of these are selected. The interview procedure and selection process, then, must be realistic and discriminating enough to identify appropriate and inappropriate students.

The purpose of this study was to analyze the characteristic determinants of these volunteering students utilized in the application procedure to determine their acceptance and rejection for the psychiatric social group work program. More specifically, the basic assumptions were that:

1. Student-volunteers make a vital contribution to mental health programs;
2. This indicates that persons utilizing the social group work technique in any setting (mental health) must possess certain personality characteristics before they can be considered effective workers in the program;
3. These characteristics are identifiable during the application interview providing it is appropriately structured and discriminately applied;

4. And that as a result of a professional evaluation of these personality characteristics, a reliable prediction of performance can be made, thus, forming the basis for the acceptance or rejection of the student-volunteer applicant.

This is an exploratory descriptive study aimed at identifying the characteristics of the accepted volunteers that significantly differentiate them from the rejected volunteers. Thus, pointing out characteristics that may form relatively sound guidelines to be used in the interview procedure and selection process to winnow out the accepted student-volunteers for the psychiatric social group work program. This objective is researched in this study by describing the specific variables and their frequency of occurrence in the population.

As stated initially, this study was undertaken as a group thesis project. However, the writer reemphasizes that data for college student-volunteers may be found in a separate report bearing the same title done by Miss Bonnie Faye Pryor. Only the data and findings for high school student-volunteers have been presented in this study. Thus, this has limited the study in that no comparisons between the two groups of student-volunteers were possible.

The data collected for this study was taken from the Children's Psychiatric Center's psychiatric social group

work department's student-volunteers' application records covering the period from September, 1965 - January, 1967.

The total population, or universe, of students who volunteered for junior and senior counselor positions in the regular week night and camp program were studied. This population included both high school and college students, which together numbered 238 applicants. This number does not include six applicants who were excluded because of incomplete responses on the application and lack of sufficient information pertinent to this study. It does include 19 applicants who were repeaters, but were only counted once and recorded once in the study materials. Of the 238 applicants, 82 were high school student-volunteers and 156 were college student-volunteers.

A schedule of items was designed for collecting data contained on the application records pertinent to gathering the applicants' personal and social characteristics including their previous group experiences and program skills, the interviewer's comments, and the interview decisions, as described in the appendix.

A system of coding was formulated to classify under general categories the varied previous group experiences and program skills. Additional itemized subdivisions were included where necessary to make for the inclusiveness of

the broad headings, as described in the appendix.

Confronted with a lack of information listed under the interviewer's comments and interview decisions posed the need for subsequent follow-up hindsight impressionistic interviews with the interviewing social group work department supervisors presently employed. When such material was listed, then no comments were additionally recorded.

The collected information from the interviewer's comments and follow-up hindsight impressionistic interviews was then arbitrarily classified under the categories of characteristics such as self-confidence, spontaneity, likeability, independence, and so forth. Special categories were set up to cover a lack of such recorded information, follow-up interview comments, and descriptive information such as, "Interviewer Did Not Remember," "Self-elimination," "Experimental and Non-experimental," etc., as can be found in the appendix.

Finally, the evaluation of performance ratings were collected for the summer camp and fall, 1966-67 periods. No such records were available for the September, 1965 - May, 1966, periods. However, repeated work periods were indicative of good-to-excellent previous performance ratings. Comparisons between the pre-ratings submitted by interview-

TABLE 9
Summary: Percentage Distribution of the Most
Frequently Occurring Variables Taken From
Each Category

Variables	Accepted			Rejected		
	Male	Female	Total	Male	Female	Total
	%	%	% ^e	%	%	% ^e
Sex	(37) ^a 66.07	(19) 33.93	(56) 100.00	(7) 26.92	(19) 73.08	(26) 100.00
Age	(37) ^a	(18)	(55)	(7)	(18)	(25)
16	. . .	. . .	. . .	. . .	16.66	12.00
17	48.8	44.45	47.27	57.15	33.33	40.00
18	35.0	55.55	41.45	42.85	38.88	40.00
19	10.8	. . .	7.15	. . .	. . .	. . .
School	(35) ^a	(18)	(53)	(7)	(16)	(23)
Ewing	2.80	16.66	7.54	. . .	18.75	13.04
Lawrenceville	77.14	. . .	50.94	71.42	. . .	21.73
Solebury	20.00	55.55	32.07	14.28	18.75	17.39
Trenton	. . .	16.66	5.66	14.28	37.50	30.43
Skills	(36) ^a	(19)	(55)	(7)	(19)	(26)
a	100.00	89.9	96.36	71.3	84.4	80.76
b	27.28	68.8	41.81	42.6	42.4	42.30
c	30.20	52.12	38.18	57.1	47.7	50.00
e	58.12	36.16	50.90	71.3	57.17	100.00
f	32.00	68.8	49.09	28.4	42.2	38.46
g	55.20	31.11	47.27	71.3	47.7	53.46

^aNumbers in parentheses represent the total of participating Accepted Male, Female, Total, and Rejected Male, Female, Total Student-volunteers for that particular variable.

^bIncluded are both Accepted and Rejected total population of student-volunteers for the years September 1965-January 1967 for the social group work program

^cIncluded in the 78.9% is one (1) who was rejected because she was too young

^dIncluded are only the accepted students who volunteered and worked in the social group work program during the period June 1966-January 1967.

^ePercentages of the Total Accepted or Total Rejected student-volunteers.

TABLE 9 - Continued.

Variables	Accepted			Rejected		
	Male	Female	Total	Male	Female	Total
	%	%	% ^e	%	%	% ^e
Group Experience	(36) ^a	(19)	(55)	(6)	(19)	(25)
1	55.20	15.00	45.45	33.2	36.16	36.00
3	16.24	52.12	47.24	16.4	73.13	60.00
4	11.4	36.16	20.00	. . .	42.2	32.00
5	63.32	68.8	65.45	83.2	52.12	100.00
Personality Characteristics	(37) ^a	(19)	(56)	(7)	(19)	(26)
B+	. . .	. . .	. . .	10.5	. . .	10.5
C+	14.8	10.6	25.4	. . .	. . .	. . .
E+	. . .	. . .	. . .	. . .	11.11	11.11
F-	. . .	. . .	. . .	10.5	. . .	10.5
L+	19.3	15.3	34.6	. . .	. . .	. . .
N+	12.5	6.7	19.2	. . .	. . .	. . .
N-	. . .	. . .	. . .	10.5	8.88	19.38
Q	. . .	. . .	. . .	. . .	11.11	11.11
Pre-rating of Potentials ^b	(37) ^a	(19)	(56)	(7)	(19)	(26)
Excellent	13.5	15.0	14.28	. . .	. . .	. . .
Very Good	8.1	15.0	10.71	. . .	. . .	. . .
Good	40.5	44.0	41.07	28.6	10.5	15.50
Fair	. . .	. . .	. . .	14.3	5.3	8.68
Unknown	35.1	26.00	32.14	57.1	78.9 ^c	73.07
Pre-rating of Potentials ^d	(23) ^a	(9)	(32)			
Excellent	17.4	. . .	12.50			
Very Good	17.4	33.3	21.87			
Good	34.7	33.3	34.37			
Unknown	30.5	33.3	31.25			

TABLE 9 - Continued.

Variables	Accepted			Rejected		
	Male	Female	Total	Male	Female	Total
	%	%	% ^e	%	%	% ^e
Post-rating of Potentials	(23) ^a	(9)	(32)			
Excellent	17.4	. . .	12.50			
Very Good	21.7	44.4	28.12			
Good	17.4	33.3	21.87			
Good-Very Good	13.0	22.2	15.62			

ers and work evaluation ratings submitted by the group leaders was undertaken.

The composite of variables utilized in this study and an account of their frequency of occurrence have been described in relation to the following categories as distributed for accepted and rejected student volunteers: sex, age, school, skills, experiences, personality characteristics, and pre and post-ratings. Tables were utilized in presenting the data findings.

A summary of the findings in table form taken from the tables described in the previous chapter is presented above. The table contains the most frequent of the occurrences as taken from each category and represented in percentages.

The findings of this study lend themselves to the

development of a more meaningful (comprehensive) picture of the characteristics differentiating the accepted student-volunteers from the rejected ones. It was the purpose of this study to seek out information about those characteristic determinants of high school student-volunteers utilized in the application procedure to find specifically on what based judgments of selection and rejection of student-volunteer applicants into the psychiatric social group work program, Children's Psychiatric Center, New Jersey State Hospital, Trenton, New Jersey. This necessitated developing methods for obtaining as reliable systematic and uniform data as possible. These methods, as utilized in this study, have been adequately discussed in other parts of this study.

Personality characteristics found vital to the effective use of student-volunteers are also used as criteria or desirable characteristics by other health and welfare agencies. Farrar and Hemmy, in their study of the use of college graduates as nonprofessional staff in work with the aged, state that their acceptance of applicants is based on criteria including "evidence of good intellectual ability, warmth, tolerance, flexibility, interest in and some understanding of people."¹ These

¹Farrar and Hemmy, op. cit., p. 46.

characteristics coincide with the Center's personality criteria of coherence, warmth, tolerance, and elatedness, as defined in APPENDIX F.

Additionally, findings of this study should yield to the development of a more precise selection process so as to provide a substantially sound basis of the interviewer's intuitive judgmental performance predictions and performance evaluations.

The specific goal of the program is a major determinant of the skills and personality characteristics used as criteria for the selection or rejection of student-volunteer applicants. The goal of the Children's Psychiatric Center is social recovery, and this is enabled by providing a normal socialization experience for every child through interaction in a small group.¹ The method employed in the small group is the use of program activities (arts and crafts, group games, sports, etc.), the use of discussion groups, trip groups, or special skill or interest groups (dancing, singing, etc.). Specific jobs that require particular skills must be performed. Table 9 shows that the most frequently occurring skills are in accordance with those necessary to effectively

¹Children's Psychiatric Center of Trenton State Hospital, "Non-Professional Group Services Program," (New Jersey, 1965), p. 1. (Mimeographed.)

carry out the group's program activities, thus making possible the goal of social recovery obtainable.

In order for the children to take positive steps toward social recovery, they need opportunities to re-establish their inter-human, inter-personal relationships without fear of being hurt.¹ Those persons, student-volunteers, who offer the children such opportunities must possess personality traits of openness, love, affection, patience, tolerance, help and guidance, kinship, warmth, acceptance, and friendliness.² They must also have a sincere interest in the children and how they can best be helped through program. This necessitates a degree of creativity and a great deal of personality and skill. The student-volunteers must realize that they are looked upon by the patient-children as "models" of the socially adjusted and accepted "normal" youth of the outside community. This is why the "borrowed ego" theory is so basic to the Center's psychiatric social group work program; for the children tend to pattern themselves after the student-volunteers, to build or strengthen their own personalities upon what the student-volunteers are able to lend or give of themselves. Such is a valuable therapeutic

¹Sharp, loc. cit., p. 13.

²Ibid.

practice. It necessitates a sense of self-confidence, stability, independence, and a degree of spontaneity on the part of the useful student-volunteer.

Positive findings of the President's Panel on Mental Retardation support our assumption that intelligible young people on the high school level can be used successfully under supervision to provide enriched therapeutic experiences in a mental health program.

A review of the literature supports the Center's reliance on several of the characteristics referred to in this study. The President's Panel on Mental Retardation criteria for selection was "based on intelligence, emotional stability, a high degree of motivation, and their desire to learn to work with children."¹ This parallels with the Center's criteria of coherence, stability, elatedness. Since the study yielded positive results in using high school people possessing such characteristics, it can be assumed, then, that these characteristic determinants are reliable criteria for selection and a substantial basis for successful performance predictions made during the selection process.

As revealed by the study reported by the President's

¹Close, op. cit., p. 94.

Panel on Mental Retardation, and found evidenced in this study, much was left up to the intuitive judgment of the interviewers since there was no preestablished guidelines for selection during the period September, 1965 - January, 1967.

This study, while an exploratory descriptive one, attempted to examine those characteristics of high school students as presented in the interview procedure which would prove to be of predictable value in the selection process as utilized by the psychiatric social group work department, New Jersey State Hospital, Trenton, New Jersey. It should pave the way for a more in-depth study of these areas of concern as presented.

Recommendations

1. That a general interview schedule be drafted for use by those social group work staff members who will act as interviewers in that they be orientated to the desirable traits, skills, experiences, etc., being sought.
 2. That more complete application records be kept with the interviewer having this responsibility. Additionally, the interviewer should be required to record his comments or impressions of the applicant and his pre-ratings.
- Thus, each applicant will have been properly identified for the selection process.

3. There is needed the systematic utilization of the categories of characteristics by the interviewers when forming impressions about the applicants and rating them. Hopefully, this will cause more uniformity in the interviewer's comments and in recording the traits sought in each applicant.

4. Since a study such as this or a more in-depth study might necessitate the use of evaluative performance ratings, it is recommended that such records be consistently kept and filed along with the interview material on the applicants.

5. Lastly, a more uniform and systematic evaluation of the student-volunteers' performance and progress is recommended, and a standardized evaluation sheet (form) might be devised and distributed to the supervisors. This form might also be useful in focusing student-volunteer supervision.

APPENDIX

APPENDIX A

CHILDREN'S PSYCHIATRIC CENTER
OF
TRENTON STATE HOSPITAL

STUDENT PERSONNEL RECORD
SOCIAL GROUP WORK

Student's Name _____ Date _____

Address _____

Telephone # _____

Personal Data

Birth date _____

Marital Status _____

Health _____

Academic Data

College _____

Class _____

Department and Course _____

Career Goals _____

Work Experience (list - include current employment)

Paid _____

Unpaid _____

Skills - Indicate specific skills such as typing, swimming, driving, languages;

Field Work

Preferences (indicate field of interest) _____

Days and hours available: _____

Instructor's Comments:
(use reverse side
if necessary)

APPENDIX B

MR. NATHAN SONNHEIM'S INTERVIEW STRUCTURE

Mr. N. Sonnheim sees the student-volunteer both before and after the ward tour and his schedule of questions and discussion proceeds as follows:

1. The areas of discussion are the following:
 - A. Program
 - B. Structure
 - C. Limits
 - D. Relationship
2. In each of these areas, the interviewer incorporates in his discussion the matters of supervision, working with the children, the role of the student worker, the aims of the agency, and the department's program, etc.
3. Question and answer period to clear up any vagueness or untouched areas important to the interviewee, etc.

Even though there is this interview schedule for the interviewer, the point was made clear that this interviewer sees this period as a process interview on a transactional basis, e.g., a method of getting an understanding of them in one interview.

APPENDIX C

MR. WILLIAM TAYLOR'S INTERVIEW STRUCTURE

Mr. W. Taylor sees the student-volunteer both before and after the ward tour and his schedule of questions and discussion proceeds as follows:

1. General orientation of program, role of worker, about children, etc.
2. Student's opinion of the ward -- problem or health orientated.
3. Discussion about student -- emphasis is on how they talk about themselves, who they are, their tone (apologetic, etc.), etc.
4. General conversation about the program -- emphasis is on how they respond, e.g., importance of job, whether or not they feel capable of doing the job, animated responses about self, others, and experiences; and need for time commitment and specifics of role, such as supervision, record writing, program skills needed, agency program aims, etc.
5. Supervision -- specifics such as, our aims of working with junior and senior counselors, how effective the counselor is with the children in terms of both positives and negatives or strengths and weaknesses, agency's policies for the department, time schedule of supervision, and any other discussion that may evolve around supervision as brought up by the interviewee, etc.
6. Over-all question and answer period, especially those that the interviewee has felt not to be clear, or has not been pointed enough, etc.
7. Closing the interview by interviewer with a "thank you" for their interest in the program as shown by their volunteering, interview attendance, etc. And with the interviewer tentatively making the future contact disposition time known.

Appendix C - Continued.

Even though there is this tentatively structured interview schedule for the interviewer, the point was made clear that much of what is discussed and when it is discussed, is dependent upon the give-and-take, back and forth process involved in the discussion.

APPENDIX D

CHILDREN'S PSYCHIATRIC CENTER OF TRENTON STATE HOSPITAL Psychiatric Social Group Work

Study of High School and College Student-Volunteers Seeking to Work in Social Group Work at the Center:

I. Student Applicant - Fall, 1965 - May, 1966

A. Identifying Information:

1. Name
2. Address
3. Sex
4. Age
5. High school or college
6. Prior group work experience
7. Special attitudes or attributes applicant manifests which are felt to be helpful in groups -- skills

B. Interviews with Applicants:

1. With whom
2. Date
3. Interview content
4. Decision:
 - (a) To employ - reasons
 - (b) Not to employ - reasons

II. Student Applicant - Therapeutic Day Camp (June-August, 1966)

A. Identifying Information:

1. Name
2. Address
3. Sex
4. Age
5. High school or college
6. Prior group work experience
7. Special attitudes or attributes applicant manifests which are felt to be helpful in groups -- skills

B. Interviews with Applicants:

1. With whom
2. Date

Appendix D - Continued.

- 3. Interview content
- 4. Decision:
 - (a) To employ - reasons
 - (b) Not to employ - reasons

III. Student Applicant - Fall Program, September, 1966 - January, 1967

- A. The same information of identifying items were used.
- B. The same interviews with applicant's information was sought.

APPENDIX E

CODING SYSTEM FOR SKILLS AND GROUP WORK EXPERIENCES

<u>Skills (Attributes)</u>		<u>Group Work Experience</u>	
<u>Category</u>	<u>Code</u>	<u>Category</u>	<u>Code</u>
Athletics and Sports . . .a		Recreational Settings . .1	
Group Games		Girl Scouts	
Circle Games		4-H Club	
Swimming and Diving		Country Club	
		Camp	
Musical Talents.b		Settlement Settings . . .2	
Singing		Community Centers	
Dancing		B'nai B'rith	
Playing Instruments			
Clericalc		Institutional Settings. .3	
Typing		School	
		Tutorial Programs	
Dramatics and Creative		Church	
Writingd		Hospital	
Playing-acting		Government Welfare	
Story-telling		Agency	
Skit-directing			
Foreign Languagee		Babysitting4	
French		Other5	
Hebrew		Experiences not related	
Spanish		to group work.	
Arts and Craftsf			
Cooking			
Sewing			
Painting			
Photography			
Working creatively			
with paper, scissors,			
crayons, paste, etc.			
Mechanical Skillsg			
Driving			
Operating Projector			

APPENDIX F

DEFINITIONS AND CODINGS
OF
PERSONALITY CHARACTERISTICS

- A+ Self-confidence -- A transmission of feeling by the interviewer of his belief in his own ability to do an adequate job of assigned tasks and responsibilities; conveying of sureness of oneself; certainty with limited doubt; positive self-image.
- A- Negative: Lack of -- Communicating doubt, a disbelief, dubiousness, negative anxiety reaction and uncertainty of oneself and abilities; afraid to risk self.
- B+ Spontaneity -- How fast, free, and open in affect one picks up on what is going on around him and uses it; moved by a natural feeling or impulse without constraint, effort, or forethought; initiated without external stimulation; extemporaneous and uninhibited reactions or verbalizations without preparation, little advanced thought or hesitation to what is going on around them during the tour and in bringing up questions during the interview; having insight.
- B- Negative: Impulsivity -- A sudden inclination to act without conscious thought, deliberation, or volition on the mere presentation of a situation, either in perception or in idea.
- C+ Openness -- Interviewee is not closed, but is frank, candid, speaks freely, making known or revealing his honest feelings both positive and negative during the interview about its content, tour, self, children, program, etc., and does not hide such feelings just to get the job. Can reveal non-verbally by gestures, voice tonations, etc.

Appendix F - Continued

- C- Negative: Closed -- Does not reveal both positive and negative feelings nor feels free to voice own ideas; reserved, stiff, distant, not talkative.
- D+ Tolerance of difference Ability to accept, but not condone people as well as conditions to which one is not accustomed; and to recognize and respect the beliefs, values, and attitudes not similar to one's own without necessarily agreeing, but able to work with them; flexible, versatile, also.
- D- Negative: Severity or Non-tolerance of -- Non-accepting of others who are not like himself and do not have similar beliefs, attitudes, etc., or conditions, etc. Arrogant, aloof, domineering, ill-treatment, strict, inflexible, uncompromising, stiff, stern, etc. Wanted too much from program -- time unsuitable, couldn't fit program; stubborn, defensive.
- E+ Warmth -- Ability to express feelings for other people and show it, e.g., both verbal and non-verbal expressions of feelings (positive, passionate, enthusiastic, affectionate, excitable, alive, quick, etc.), through actions and discussion in interview and during tour (might be kind, friendly, sympathetic, etc.)
- E- Negative: Cold -- Unsympathetic, unkind, unfeeling; not cordial or receptive; detached and calm, deliberate indifference, too slight, etc.
- F+ Empathy -- Ability to feel through identification with the human feelings and problems of another; emotional identification with another and perception of his problems and discussion of one's positive involvement in the program to help do something about same.
- F- Negative: Intellectual Identification -- Ability to conceptualize and be theoretical, but unable to emotionally identify. Immobile and unable to function in practice. Observer.

Appendix F - Continued

- G+ Stability -- Able to take children, supervision; be auto-critical and survive without buckling under, breaking down, or giving way; to be consistent and uniform in moods and methods of handling the children or situations; must have an integrative, equilibrated personality, strong ego, and firmness of character, purpose, etc.; must be settled, sturdy, well-organized and structured; able to properly use and regulate amounts of relationships, and be logical. Each should be represented in the interview.
- G- Negative: Changeableness or Non-Stability -- Unsteadiness, shaky, varying, or not consistent in moods, character; flighty, unsettled; given to sudden whims; frivolous, mentally unbalanced, disorganized in thought, patterns, discussions (without logical sequences), etc.
- H+ Likeability -- One should be able to put oneself over to others positively; be congenial, pleasant, enjoyable; drawing affections and fondness, etc. Very subjective ; depends upon how interviewer perceives the individual from presentation, physical attraction and appearance, friendliness, etc.
- H- Negative: Dislike -- A feeling of not liking, distasteful, unpleasant, disagreeable; feeling of aversion to another, offensive, unattractive, unsatisfactory, unfriendly, etc.
- I+ Independence -- Free from the influence and control of another, self-reliant, self-determined; seems capable of individual thinking and actions; able to plan and carry on program, making decisions and judgments without constant and immediate attention from supervisors. A responsible person who may need supervision to minimize his problems that affect his work with groups and staff supervisors. Problems with authority.

Appendix F - Continued.

- I- Negative: Dependence -- In need of much supervision in order to support and foster self-reliance, decision-making, for a source of help in carrying out assignments in work. Lack of responsibility to do own thinking and actions. Also unable to accept supervision; immature and naive.
- J+ Overt and Covert Agreement -- Open, non-concealed, outwardly verbal with accordance to get along with or suit the interviewer and/or without revealing their latent, maybe disharmonizing, feeling; seemingly completely in accordance the conditions, questions, etc., asked by the interviewer in order to get the job. Emphasis on pleasing and giving or making desired comments.
- J- Negative: Covert -- Openness vs Pretense Accordance, e.g., agreement with another to get desired goal, a job, without revealing actual feelings. Pseudo-sophisticated.
- K+ Coherence -- The quality of being logically connected, intelligible; easy to follow trends of thought of expressions, questions, and answers in the interview.
- K- Negative: Disjunction -- Unassociated, unconnected, abstract, isolated, unrelated, incoherent expressions, unintelligible, etc.
- L+ Elatedness -- Interviewee shows and expresses excitement over the program; feeling and looking forward to participation; emotional, animated, and raised spirited movements showing their interest about the program and children. Both verbal and non-verbal excitement reactions to interview content. Much interest, making self available, and eager to learn.
- L- Negative: Dejection and Depression; Lifeless -- Dampened or low spirits, discouraged; deferred feelings and expressions.
- Inanimated, inert; disinterested because of depressing feelings after tour, seeing children, introduction to program.
- Anxiety reaction -- Just their general personality trait - grave, ill-at-ease, overcome manner.

Appendix F - Continued.

- M+ Tolerance for Aggression and for Sexuality -- Ability to handle overtures, hyperactivity, acting out, and/or attacks of physical, sexual, and emotional nature and perceiving them in the proper perspective -- not condoning such behavior by expressions, but working with them positively. The ability to endure or resist the affects of such displays while working with the children toward social recovery. Such abilities are implicated during the tour and interview discussion of past experiences and assignments.
- M- Negative: Non-tolerance for Aggression and Sexuality -- Inability to accept and endure such displays of this nature; becoming impatient, domineering, etc., and unable to do positive goal-directed work.
- N+ Appropriate Relationships -- The ability to associate with or be affected by connections between or among persons, groups, etc.; how he speaks of such references drawn from his past life events such as, family relations, clubs, etc. In addition, how he is observed to reach out to or respond to the reaching out of the children during the tour, the staff or interviewer, and program being described to him, all in a desirable manner.
- N- Negative: Inappropriate Relationships -- Stiff, scared, stand-offish, isolated, observer, afraid, anxious, alarmed, shy, etc.

Special Categories:

- Ø - Interviewer did not remember.
- P+ - Experimental position.
- P- - Non-experimental position because of time needed and personal problems.
- Q - No vacancy.
- R - Too young (15, 16 years or under)
- S - Got another job before camp hiring notification.
- U - Too old (34 years up, plus other reasons)
- V - Needed male workers, therefore, accepted.
- W - Self-elimination because of lack of interest when contacted for disposition notification; sickness, personal problems, and transportation problems.

APPENDIX G

CHILDREN'S PSYCHIATRIC CENTER OF TRENTON STATE HOSPITAL Trenton, New Jersey

NON-PROFESSIONAL GROUP SERVICES PROGRAM

CHILDREN'S PSYCHIATRIC CENTER PURPOSE: To provide a normal socialization experience for every child through interaction in a small group.

EDUCATIONAL VALUE FOR STUDENT: To provide a professional supervisory experience in working with small groups.

METHOD: Use of program activities (arts and crafts, group games, sports, etc.), the use of discussion groups, trip groups, or special skill or interest groups (dancing, singing, etc.)

STAFF: College students from the sophomore to senior year who are interested in having an experience under professional supervision in working with the emotionally problematic youngster. Every student must first be interviewed by professional group worker from the agency.

TIME: Evenings 6:00 - 9:00 p. m. Student must put in a minimum of three hours a week.

ASSIGNMENT: Each group leader (college student) would be responsible for: (1) Meeting with their group one-and-a-half hours a week; (2) Meeting with supervisor one hour, if needed; (3) Attending orientation and student staff meetings when called; (4) Attending mass activities of which their group is a part (carnival, etc.); (5) Writing records of group activity for use in supervision.

GENERAL INFORMATION: Each college student will be responsible for working with a small group of children (5-10) on a semester basis. Age group ranges from 5-16 years of age. Group leader (college student) will be responsible for supervision of children during meetings, as well as planning activities for the hour-and-a-half with the group where possible. Group leaders will be responsible for meeting with the same group throughout the semester. Each student will be responsible for his own group.

Appendix G - Continued.

CHILDREN'S PSYCHIATRIC CENTER OF
TRENTON STATE HOSPITAL
Trenton, New Jersey

Student Staff Responsibilities

CLINICAL ASSIGNMENT: Each student will be responsible for meeting with at least one group of children and having an activity with them once a week. The purpose will be to increase socialization and encourage more healthy interaction with the emotionally problematic youngsters. It is hoped that this will aid the youngster in being more able to return to the community.

CLINICAL RESPONSIBILITIES WILL BE:

- (1) Meeting with a group of children twice a week.
- (2) Meeting with clinical supervisor once a week.
- (3) Attending orientation and student staff meetings when assigned.
- (4) Attending mass activities of which their group is a part.
- (5) Writing records of group activity for use in supervision.
- (6) Attending and taking part in clinical staff meetings when possible.
- (7) Student staff will be directly responsible to social group work department.

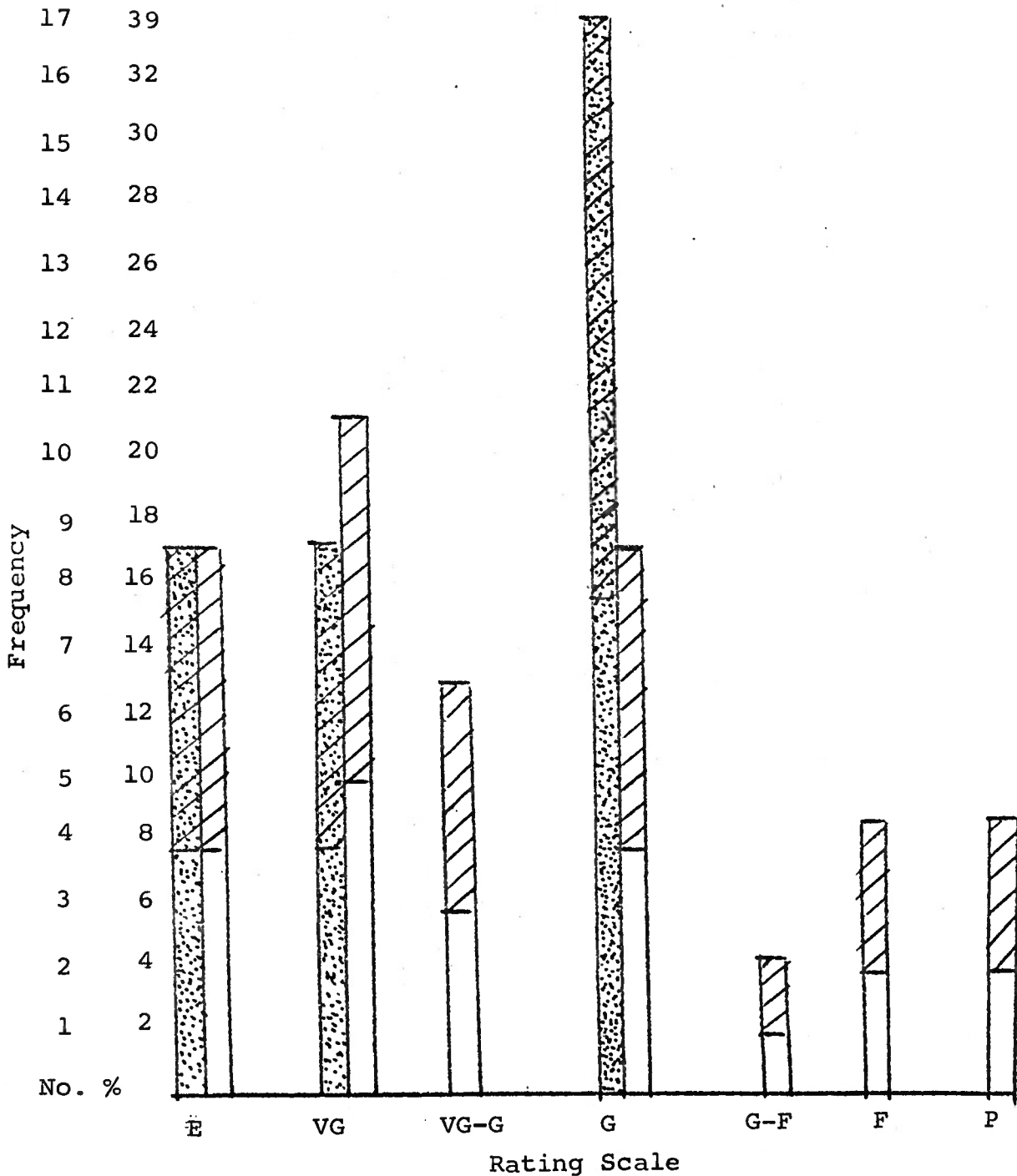
MILIEU ASSIGNMENT: Each student would be responsible for working directly on the unit with the children for a portion of this work assignment. It is hoped that students can use their creativity in this area to help in the actual living situation of the children.

NS/ylp (8/11/65)

APPENDIX H

Graph 1

Pre and Post-Ratings for Accepted High School Males



Key:

Pre-rating^a - 23 total (7 unknown)

No.

%

^a Sept., 1965-Jan., 1967

Post-rating^b - 23 total (2 unknown)

No.

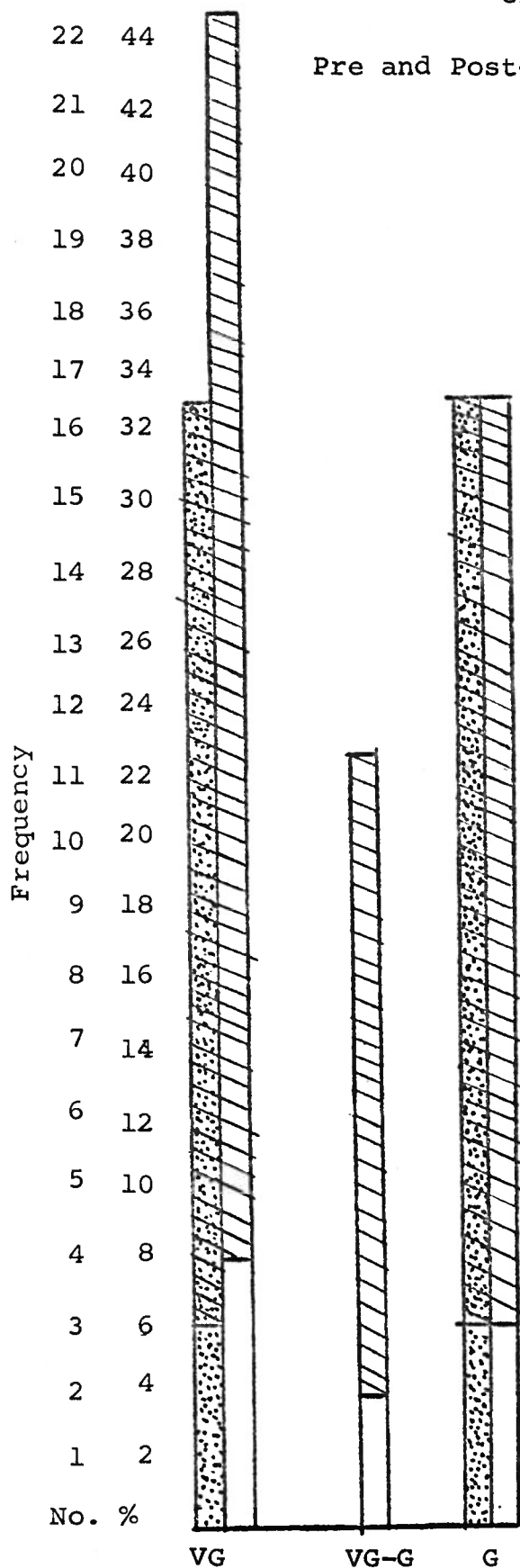
%

^b Sept., 1966-Jan., 1967

APPENDIX H

Graph 2

Pre and Post-ratings for Accepted High School Females



Key:

Pre-ratings^a - 9 total (3 unknowns)

No.

%

Post-ratings^b - 9

No.

%

^aSept., 1965-Jan., 1967

^bJune, 1966-Jan., 1967

APPENDIX I

CHILDREN'S PSYCHIATRIC CENTER
OF
TRENTON STATE HOSPITAL

S T U D E N T S T A F F M A N U A L

CHILDREN'S PSYCHIATRIC CENTER
OF
TRENTON STATE HOSPITAL
STUDENT STAFF MANUAL

Children's Psychiatric Center of Trenton State Hospital is a residential psychiatric treatment program for seventy-five children from 6-14 years of age. Children in Center are committed to Hospital because of psychiatric illness from the hospital catchment area which includes the eastern half of Essex County, Hudson, Somerset, Hunterdon, Mercer and Warren Counties.

The program in Children's Center is composed of a children's psychiatric clinic, a milieu in which the children live, and a psychoeducational program. Children's Psychiatric Center is an active member of the American Association of Psychiatric Clinics for Children.

The treatment goal for children is social recovery, with as early return of the child to his family and community as his convalescence indicates. Staff in Children's Center work closely with local clinics, hospitals, social agencies, and schools, so that the convalescent child's return to family and community is bridged to realistically help him move from Center to the appropriate community resources, as comfortably as he can.

Psychiatric Social Case Work and Psychiatric Group Work in Center focus actively on the enablement of the convalescent child to return to family and community, and to stabilize him in community. The parents and relatives of the child participate actively with Center Staff in helping accomplish these aims.

SMALL GROUP STAFF MANUAL

STUDENTS INTRODUCTION

This is your manual. Program materials herein are not all inclusive. It is hoped that you will include in your work with the children some of the ideas and suggestions offered. The pre-meeting orientation will help you to see just how program materials can be used effectively and will present a clear picture to you as to the purpose of the program and your part in it. As you will learn, all programs have a specific purpose when used in a clinical setting. An understanding of the proper use of program ideas, and the ability to put this into program content which is meaningful to your children is of paramount concern. This manual is not a rigid blueprinted prospectus for you to follow. It is hoped that you have ideas to add to or replace those contained in this manual which through experience, and use, should be added to, for only through your imagination and creativity will the ultimate goals of this program begin to blossom and flower. In a sense you are the pioneers who will pave the road towards a good beginning.

OBJECTIVES OF SMALL GROUP PROGRAM

The Children's Psychiatric Center's purpose is to bridge the gap between institutionalization and community. One way of moving towards this goal is the utilization of the small group experience. This one method will primarily be the use of socialization through activity (games, crafts, discussion, etc.) in the small group situation under professional supervision. We will try to provide a setting for our children that will enable them to find, in small group participation the things that will lend themselves toward a richer and fuller life. New friendships, stimulating and exciting new experiences, sharing things with others, getting experiences in outside living, being the leader, the follower, and being allowed to make decisions are the things that will develop a security and a feeling of status so necessary for the growing child who must learn to live and contribute to a real world.

SMALL GROUP STAFF

The small group staff includes the Director of Professional Group Services, the Director of Volunteers, Consultants in Psychiatry, Psychology, Psychiatric Social Work, Nursing Staff, Secretaries, allied therapists and attendents.

GROUP ROUTINE

The program begins Monday, October 4 and runs to Friday, December 24. Group activities will usually take place after 3 p.m. during the weekday. There may be some weekend activities. There will be about 50 children divided in 10 groups. Grouping will be based on function as well as age and sex. Students for the most part will have a maximum of eight children to a group.

TRANSPORTATION

Buses and cars are available if the student requests transportation a week in advance from his supervisor. Use of private vehicles may be possible with advance notice.

ATTENDANCE SHEETS

Students will be required to keep an attendance sheet which should be filled in and left on your supervisor's desk before leaving.

SUPPLIES

All supplies are housed in the administrative area closets. Students must sign out for equipment to be borrowed.

Requests for new supplies should be made a week in advance to your supervisor.

All equipment and keys must be returned to their proper place!!

TRIPS

Out of Center trips should be arranged with supervisor at least a week in advance.

FORMS AND RECORDS

"Paper work", while not as satisfying nor interesting as the actual working with a group, is nevertheless a necessary and integral part of good planning, programming and follow-up. Paper work, or the keeping of records, filling out of forms, making out reports, etc., is necessary for a good program. We have attempted to keep the paper work at a minimum, and the following are the essentials:

1. Staff Attendance (sign-in) sheet.
 2. The Group Roster and Daily Attendance Record.
 3. Group Report (weekly).
1. Staff Attendance (sign-in sheet): This is left in supervisor's office on the desk. All leaders and volunteers are required to indicate the time of arrival and departure at the end of the day. In case of absence, call the agency and let them know. If for some reason you will be absent and know so in advance, notify your supervisor as early as possible.
 2. Group Roster and Attendance: The name of the group, the names of its members, and your name should all be filled in. Attendance should be noted daily with a check for those present, and left blank for absences. There is room for a full four week's attendance check. All attendance should be taken at the start of the day.
 3. Weekly, Individual and Group Report: To present a weekly picture of the individual and group's activity, functioning, development, progress and problems and to help organize the counselor's thinking and working with the individual and group.

SUGGESTED LOCAL TRIPS

State Buildings

Airport

Railroad Station

Library

Bakery

Kern's Plant

Cadwalader Park

Radio Station

State Museum and Planetarium

Post Office

Bike Trips

Other Camps

Fishing

Evening Campfire

Miniature Golf

Horseback Riding (for Pioneer Camp only)

Canoeing (for Pioneer Camp only)

Wilburtha State Police Academy

Allaire State Park

Audobon Sanctuary

STORY TELLING

"Story-telling is an art." It is true that some people seem to be "born" story-tellers. Yet, just as in any other artistic endeavor, the individual with some latent talent can learn certain skills -- Practice of these skills will lead to ever greater command of the medium.

The "latent talents" can be named very simply; thorough enjoyment of people, sincere enjoyment of a good story, and real enjoyment in telling a story.

SELECTING THE STORY

1. Suitability to the group?
2. Time and Place?
3. Purpose?

PREPARING THE STORY FOR TELLING

1. When you have chosen a story to tell aloud, read it carefully, then put it aside and think about it until you can picture the story to yourself, clear in all its details. If you discover any weak spots, read the story again. Try telling it silently to yourself. If you want, rehearse it aloud, but don't do that if it makes you self-conscious or your phrasing stilted.
2. Be sure you have a feeling for the story when you tell it.
3. It is better to know a few stories well than to acquire a varied repertoire of stories you are not sure of and can't tell with confidence.
4. Whether or not it is best to memorize a story depends on the story. The stylist's stories have to be told almost exactly the way they are written to be fully appreciated. Other types can be told effectively in the story-tellers own words provided he knows the story well.
5. Don't try to improve or change essential features of traditional stories. If you think a story ought to be changed to be told to children, leave it alone and tell another story.

TELLING THE STORY

1. Before the story starts, children should all be seated comfortably, preferably in a semi-circle so that each can see the story-teller's face.
2. Now that you have your story selected, your audience seated comfortably and in the right mood, tell the story simply, directly and dramatically.
3. Focus the interest of your audience by your first sentence. Make them want to listen.
4. Put yourself in the mood of the story. Know it so well that you tell it without interruption.
5. Phrase the story in language within the mental grasp of the audience. Children like words and are interested in hearing new ones, but it is a mistake to introduce new words, which, if not rightly understood, will alter the picture you want to present.
6. Never "talk down" to your audience. Choose a story your audience will appreciate, tell it in language they will understand, but do not deliver it patronizingly or in an obviously over-simplified manner.
7. Learn the art of pausing at the right moment. A pause heightens the dramatic effect and directs interest to the coming sentence.
8. Gauge the effectiveness of your presentation by watching the faces of your audience.
9. Be frank with the children about the stories. Tell them if they ask, whether it is a fairy story, folk tale or legend.
10. Never tag a moral on a story. It is not only unnecessary but it is an anti-climax and weakens the story. If a story does not have its own message, a mild tag will not give one to it.

ARTS AND CRAFTS

The urge to create is a natural human need for self-expression. The child as an art student is a "natural" for the instruction. He is at the state where creation is still more important than the method or the finished product. He has not yet learned the prejudice due to comparison which causes discouragement. Here is an artist who is satisfied with all he creates. He is delighted with the tree or the face which he paints and it looks no less professional to him than the ones done by an adult artist. No matter how primitive his work is, he is completely contented with his expression.

The child can be frightened away from art when it appears complicated and difficult. The enthusiasm with which each new project is received depends on the instructor. Through the method of presentation the instructor can give to the child the enjoyment in working and pride in the results.

Arts and crafts cannot be taught to children without the instructor knowing why each project is being given. If it is only looked upon as "busy work", the entire idea is pointless and wasted. The instructor must know what is to be gained by the work and to instruct in such a manner that the most is gained from each effort.

The finished project in itself is least important as such to the teacher. It is most important not to judge it by adult standards, but to evaluate the end product in terms of beneficial gains in the work required in the creation. If the child works with interest and enthusiasm this end product will be something very special to him.

Art is fun - it is to be enjoyed as a pleasureable pastime and can be made fun for everyone.

Most projects can be given to any child regardless of the age. No experience in art is too elementary even for the experienced craftsman. A project as simple as a "Scribble drawing" can be made fascinating work to an adult as well as to a child and the finished picture as exciting. Limitations to age levels should be made only when there is difficulty in operation or understanding of instructions or tools required. Different age levels, however, have different attention spans, interests, and learning attitudes which have to be taken into consideration. This is the difficult part of instruction. The manner of presentation and the degree to which each project is carried should vary depending upon the age level, but the idea and purpose can remain the same.

The 5-6 year old child:

The child of this age group is strictly creative. He is individualistic in that he is concerned chiefly with his own idea and work. As long as he is interested he is satisfied and enthusiastic. He works better when he is left to his own ideas. The instruction should be limited to guidance and suggestions and not dictation or an effort to change. He should be allowed to choose his own materials. If his method is forced, he will lose interest quickly. The child in this group should be allowed to work large and freely. His own ideas and imagination should be encouraged. His materials should be few and those which he uses should be large and easy to handle. He resents limitations and enjoys busying himself and actively gets "into" his work. He likes making a mess and getting mused increases his enthusiasm.

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Suggested projects -

Modeling	Finger painting	Scribble drawing
Paper flowers	Pasting	Paper hats
Paper Tearing or cutting	Painting	Paper masks

The 7-8 year old child:

Children of this group are more difficult to instruct than of the younger group. Their personalities vary in interest and attention. It is not as easy to treat them as a group and more observation has to be given individually. Some of this group will be content with doing work which has been chosen for them; others will be inclined to prefer doing the work of the younger group; and some will try to do skills which are obviously too difficult for them. It is possible to give them the same project, but each child falling into one of the patterns mentioned will require special attention to hold his interest.

Children of this group are very active and have a great deal of curiosity. They are anxious to try new things in new media, to experiment and to learn. They are also just beginning to have an interest in crafts - to make things requiring more activity than the use of a pencil or brush because they are interested in learning to do something better than they have been able to do. Unlike the younger set, which is satisfied most with the work entailed, this group is more concerned with the finished project. They are gaining standards of others in the group. They become discouraged rather quickly when they feel that their project isn't going to be a good one or when they feel incapable of the work.

Suggested projects:	Paper mache	Paper craft - mats
	Pasting	fans
	Modeling	kites
	Painting	flowers
	Paper Weaving	paper rope
	Scrapbook	raffia
	Block printing	Balsa Wood
	Lanyards	Paper Weights
	Wood work	Painting glass

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The 9-10 year old child:

This group is most difficult to interest in art and craft work as a group. By the time they reach this age, they have decided for themselves about their capabilities in art work. Those who have the idea that they cannot do the project become extremely restless and disrupt the rest of the group. It is the job of the instructor to find something to interest the most reluctant child. This can be accomplished if presented in the correct way. These children are still more critical of their own work and are reluctant to try that which they feel is too much for them. They have by this time acquired standards of what they consider good. Their craft work has to be near perfection to be satisfactory and their art work realistic. Once they are interested and have gained confidence in their ability, it is easy to get them to carry their knowledge further. By now they have acquired a great deal of dexterity with their hands and more difficult tools and operations can be given to them.

Suggested projects: Paper Hats Paper Tearing or Cutting
 Paper Masks Finger Painting
 Paper Flowers Pasting
 Painting Modeling
 Scribble Drawing

PRINCIPLES OF SONG LEADERSHIP

I. Purposes of Singing

1. To give the participants pleasure. (For most people singing is a naturally joyous activity).
2. To unify the group.
3. To stimulate creative imagination, in interpreting and singing appropriately songs of various moods and styles.
4. To quiet a group that has been engaged in more vigorous activity or one that is in an over-stimulated, too hilarious mood.
5. To encourage knowledge and appreciation of good music, not only of our own country but that of other lands and peoples.
6. To supplement and liven other activities in which the group is engaged, especially dramatics, dancing, hiking, and camping.

II. Selection of Songs and Preparation for Presenting Them

1. Find out the group's present acquaintance with songs.
2. If the members' experience is limited to popular music and songs learned in school, they may cling to these because of their familiarity, and resist your attempted introduction of anything else.
3. If so, start gently, singing what they already know, then introducing some kind of interesting "stunt song" new to them, but not too different from the type of music they know.
4. Once you are accepted as a song leader, you can introduce some catchy folk tunes and art songs and usually a group will learn to appreciate and enjoy these fully as much as the popular music, provided you have not "rushed" them or tried to make them feel they ought to like something different.
5. Always have thoughtful reasons for choosing a song to present, considering the age, sex, and interests of your group members, as well as your own enjoyment of and ability to sing the song.
6. KNOW THE SONG SO THOROUGHLY THAT YOU NEED NOT DEPEND UPON A BOOK DURING YOUR PRESENTATION

III. Presentation of Songs

1. Introduce the song as briefly as possible, telling one or two interesting facts about it, or asking the group to listen for some specific thing; for example:
 "Who are the characters in the story the song tells?"
 "What kind of place does the song describe?"
 "From what country do you guess this song may have come?"
2. Ask the group to listen while you sing the song through as well as you possibly can, with the pitch, enunciation, and style that will serve as a good example.
3. If you have asked questions, give the group time to answer briefly.

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4. Ask the group to listen while you sing the song again. (They may try to hum along with you, but be firm about this, explaining that their ears need to hear it very well and correctly before their voices will know what to do.)
5. Next, sing this song line by line, one line at a time, asking the group to echo it exactly, coming right in after you each time with the same rhythm and tempo.
6. Have the group sing their "echoes" softly, and stop whenever necessary to correct inaccuracies.
7. Next have the group sing the whole song through with you (still softly).
8. Repeat once or twice, if interest is still high, but avoid "drilling". Stop, and then return to singing after some other kind of activity. The singer will learn more quickly, accurately, and pleasurablely through frequent brief exposures than from tedious practice periods.

IV. Special Points to Remember in Teaching Songs to Children

1. Be sure to pitch songs a little higher than is comfortable for you. Children's light voices can be ruined by singing too low.
2. Most children tend to sing too loudly, also. Help them learn the difference between a musical volume and shouting.

PRACTICAL TECHNIQUES FOR LEADERSHIP OF GAMES

1. Get players into formation for game --make sure all can hear you.
2. Name it and explain briefly.
3. Explain object of game.
4. Describe and demonstrate method of play.
5. Describe rules, fouls, scoring, etc.
6. Give opportunity for questions.
7. GET GOING!

EVALUATION

- Was it well chosen for group?
- Did players enjoy it and have a good time?
- Did everyone have chance to participate?
- Was it safe?
- Did it teach basic skills?
- Did players have chance to make suggestions?

POINTS TO REMEMBER IN PLAYING GAMES

1. Know your game thoroughly -- Explain it briefly.
2. Insist on fair play.
3. Resting between games is important.
4. Choosing sides --
 - 2 captains -- Leader select teams.
 - Teams should be equal.
 - New leaders chosen for every game.
5. VOICE -- Speak slowly and distinctly.
 - Do not shout.
 - Make sure everyone is paying attention.
6. PREPARATION -- Make sure you have all equipment on hand when starting a game.
7. PARTICIPATION -- Everyone should participate. If he cannot play, he may be used for judging, timing, scoring, etc.
8. DISCIPLINE -- Friendliness and soft voice, quiet manner, is more effective than sharp words.
 - Too many warnings is not good policy.
 - Reprimand outside of the group.
 - Yelling gives bad impression -- on occasions whistle will help.
 - KEEP HANDS OFF CHILDREN.
 - DO NOT PLAY favorites nor hold any grudges.
 - Punishment should be brief.

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